

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

Republican Party of Wisconsin

ADDRESS (number and street) 148 E. Johnson Street

Check if different than previously reported. (ACC)

Madison WI 53703

2. **FEC IDENTIFICATION NUMBER** C00074450

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input checked="" type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 02 01 2007 through 02 28 2007

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

Type or Print Name of Treasurer Cathy Stepp

Signature of Treasurer Electronically Filed by Cathy Stepp Date 01 04 2008

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		4485.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	39052.14									
(c) Total Receipts (from Line 19)	125693.61	288256.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	164745.75	292741.44								
7. Total Disbursements (from Line 31)	118153.96	246149.65								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46591.79	46591.79								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	27276.26									

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	26000.00	66500.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	98424.00	212975.59
(iii) TOTAL (add Lines 11(a)(i) and (ii)	124424.00	279475.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	124424.00	286975.59
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1269.61	1280.44
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	125693.61	288256.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	125693.61	288256.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2478.38	7317.54
(ii) Non-Federal Share.....	6372.98	18861.58
(b) Other Federal Operating Expenditures.....	32313.37	80756.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	41164.73	106935.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	7000.00	7106.41
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2500.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	2500.00	2500.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	67489.23	129607.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	67489.23	129607.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	118153.96	246149.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	111780.98	227288.07

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	124424.00	286975.59
34. Total Contribution Refunds (from Line 28(d))	2500.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	121924.00	284475.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34791.75	88073.98
37. Offsets to Operating Expenditures (from Line 15, page 3)	1269.61	1280.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33522.14	86793.54

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) William Barry	Date of Receipt MM / DD / YYYY 02 / 27 / 2007
	Mailing Address 15085 Bending Brae Ct	Transaction ID: SA11AI.27791
	City State Zip Code Brookfield WI 53005	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Speed Systems, Inc Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Lisa Buestrin	Date of Receipt MM / DD / YYYY 02 / 12 / 2007
	Mailing Address 1000 W Calumet Rd	Transaction ID: SA11AI.27792
	City State Zip Code River Hills WI 53217	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) James Callan	Date of Receipt MM / DD / YYYY 02 / 02 / 2007
	Mailing Address 1711 E Dean Rd	Transaction ID: SA11AI.27793
	City State Zip Code Milwaukee WI 53217	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation James L Callan Inc Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 7 / 52
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Michael Cudahy		Date of Receipt MM / DD / YYYY 02 / 05 / 2007		
	Mailing Address 9100 N Swan Rd		Transaction ID: SA11AI.27796		
	City Milwaukee	State WI	Zip Code 53224	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer The e endeavors Group, LLC	Occupation Manager		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼	1000.00
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B.	Full Name (Last, First, Middle Initial) David Drumel		Date of Receipt MM / DD / YYYY 11 / 07 / 2006		
	Mailing Address N82 W23548 Pitching Wedge Ct		Transaction ID: SA11AI.27789		
	City Sussex	State WI	Zip Code 53089	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Best Efforts Compliance		
	Name of Employer Good Electric	Occupation Vice President		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼	.00
--------------------------	-----

C.	Full Name (Last, First, Middle Initial) Thomas Farrell		Date of Receipt MM / DD / YYYY 01 / 03 / 2007		
	Mailing Address 323 S Beaumont Rd		Transaction ID: SA11AI.27856		
	City Prairie Du Chien	State WI	Zip Code 53821	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Best Efforts Compliance		
	Name of Employer Peoples State Bank	Occupation Banker		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼	.00
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SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Richard Fischer		Date of Receipt
	Mailing Address 9517 N. Wakefield Ct		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Milwaukee	WI	53217
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27797
Name of Employer Self		Occupation	Amount of Each Receipt this Period
		Fin. Cons.	<input type="text" value="250.00"/>
Receipt For:		Aggregate Year-to-Date ▼	Contribution
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Dean Fitzgerald		Date of Receipt
	Mailing Address 3205 W County Line Rd		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Milwaukee	WI	53217
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27800
Name of Employer Capitol Service Inc		Occupation	Amount of Each Receipt this Period
		President	<input type="text" value="500.00"/>
Receipt For:		Aggregate Year-to-Date ▼	Contribution
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Vincent Fonti		Date of Receipt
	Mailing Address 1749 Buckhorn Rd		<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Woodruff	WI	54568-9772
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27802
Name of Employer Boston Inc. & Furniture		Occupation	Amount of Each Receipt this Period
		Owner	<input type="text" value="500.00"/>
Receipt For:		Aggregate Year-to-Date ▼	Contribution
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

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

Mailing Address 3551 Scenic Vista Ct

City Waterford State WI Zip Code 53185-4739

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2007

Transaction ID: SA11AI.27803

Amount of Each Receipt this Period 500.00

Contribution

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

Mailing Address 450 Losey Court Lane

City La Crosse State WI Zip Code 54601

FEC ID number of contributing federal political committee. C

Name of Employer Northern Engraving Corp Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 20 / 2007

Transaction ID: SA11AI.27805

Amount of Each Receipt this Period 5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Jo Ann Greb

Mailing Address 8861 W wilson Bay Dr

City Hayward State WI Zip Code 54843

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 26 / 2007

Transaction ID: SA11AI.27807

Amount of Each Receipt this Period 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) 5750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Jay Hamann	Date of Receipt MM / DD / YYYY 02 / 28 / 2007
	Mailing Address 558 Pinehurst Avenue	Transaction ID: SA11AI.27808
	City State Zip Code Green Bay WI 54302	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Thomas Hauske	Date of Receipt MM / DD / YYYY 02 / 22 / 2007
	Mailing Address 4664 Fontana Beach Rd.	Transaction ID: SA11AI.27810
	City State Zip Code West Bend WI 53095	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Robert Hegwood	Date of Receipt MM / DD / YYYY 02 / 26 / 2007
	Mailing Address S79 W36855 Wilton Road	Transaction ID: SA11AI.27811
	City State Zip Code Eagle WI 53119	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer CCI Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Dennis Heyde	Date of Receipt MM / DD / YYYY 02 / 22 / 2007
	Mailing Address 7539 161st Street	Transaction ID: SA11AI.27813
	City State Zip Code Chippewa Falls WI 53729	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Heyde Health Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Cynthia Johnson	Date of Receipt MM / DD / YYYY 02 / 20 / 2007
	Mailing Address 2578 24th St	Transaction ID: SA11AI.27815
	City State Zip Code Rice Lake WI 54868	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Christopher Magiera	Date of Receipt MM / DD / YYYY 02 / 21 / 2007
	Mailing Address 1506 Pine View Ln	Transaction ID: SA11AI.27817
	City State Zip Code Wausau WI 54403	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer GI Associates SC Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Nicholas May		Date of Receipt
	Mailing Address 3102 Old Gate Road, #A		<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Madison	WI	53704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27818
Name of Employer Refrigeration Systems, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) Michael Nelms		Date of Receipt
	Mailing Address 1129 26 3/4th Ave		<input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Cumberland	WI	54829
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27819
Name of Employer Self		Occupation Flight Instructor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) William Ross		Date of Receipt
	Mailing Address PO Box 435		<input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Shawno	WI	54166-0435
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27821
Name of Employer Ross Carbide & Supply		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
		<input type="text" value="300.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="800.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 52

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Terence Schmahl

Mailing Address 1925 West Dean Road

City State Zip Code
River Hills WI 53217

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
M W Hsi Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.27822

Amount of Each Receipt this Period 250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Frederick Schwertfeger

Mailing Address 13020 Oriole Lane

City State Zip Code
Brookfield WI 53005

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Horicon State Bank Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.27825

Amount of Each Receipt this Period 250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Frederick Schwertfeger

Mailing Address 13020 Oriole Lane

City State Zip Code
Brookfield WI 53005

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Horicon State Bank Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: SA11AI.27826

Amount of Each Receipt this Period 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Joe Sensenbrenner	Date of Receipt MM / DD / YYYY 02 / 09 / 2007
	Mailing Address 114 Limeklin Dr	Transaction ID: SA11AI.27827
	City Neenah State WI Zip Code 54956	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Retired Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) Brett Smith	Date of Receipt MM / DD / YYYY 02 / 22 / 2007
	Mailing Address 3308 Emerald Valley Drive	Transaction ID: SA11AI.27828
	City Onalaska State WI Zip Code 54650	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) Lloyd Smith	Date of Receipt MM / DD / YYYY 02 / 12 / 2007
	Mailing Address 1629 W Pinewood Ct	Transaction ID: SA11AI.27829
	City Mequon State WI Zip Code 53092	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2000.00	

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

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

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

FOR LINE NUMBER: PAGE 15 / 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Rita Stilin
Mailing Address 72303 Pufal Rd
City High Bridge State WI Zip Code 54846
FEC ID number of contributing federal political committee. **C**
Name of Employer North Country Lumber Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 02 / 15 / 2007
Transaction ID: SA11AI.27837
Amount of Each Receipt this Period 300.00
Contribution

B. Full Name (Last, First, Middle Initial)
Rita Stilin
Mailing Address 72303 Pufal Rd
City High Bridge State WI Zip Code 54846
FEC ID number of contributing federal political committee. **C**
Name of Employer North Country Lumber Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 02 / 20 / 2007
Transaction ID: SA11AI.27838
Amount of Each Receipt this Period 100.00
Contribution

C. Full Name (Last, First, Middle Initial)
Janice Tipple
Mailing Address 4010 Shadows Court
City De Forest State WI Zip Code 53532
FEC ID number of contributing federal political committee. **C**
Name of Employer GI Office Tech Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 02 / 05 / 2007
Transaction ID: SA11AI.27843
Amount of Each Receipt this Period 500.00
Contribution

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 52
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial) Margaret Van Alstyne		Date of Receipt MM / DD / YYYY 02 / 05 / 2007
Mailing Address 3423 Sunset Dr		Transaction ID: SA11AI.27844
City Madison	State WI	Zip Code 53705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Homemaker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) James Villa		Date of Receipt MM / DD / YYYY 10 / 24 / 2006
Mailing Address 1331 S 93rd St		Transaction ID: SA11AI.27790
City Milwaukee	State WI	Zip Code 53214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Milwaukee County	Occupation Chief of Staff	Best Efforts Compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	26000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 52
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Sherry Schultz

Mailing Address 1418 Pleasure Drive

City State Zip Code
Madison WI 53704

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

Name of Employer Occupation
RPW Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.53

Date of Receipt
MM / DD / YYYY
02 / 01 / 2007

Transaction ID: SA15.27824

Amount of Each Receipt this Period
305.53

COBRA reimbursement

B.

Full Name (Last, First, Middle Initial)
WE Energies

Mailing Address 231 W Michigan Street

City State Zip Code
Milwaukee WI 53203

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 725.79

Date of Receipt
MM / DD / YYYY
02 / 09 / 2007

Transaction ID: SA15.27850

Amount of Each Receipt this Period
725.79

Refund - overpayment of utility bill

C.

Full Name (Last, First, Middle Initial)
WE Energies

Mailing Address 231 W Michigan Street

City State Zip Code
Milwaukee WI 53203

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 964.08

Date of Receipt
MM / DD / YYYY
02 / 21 / 2007

Transaction ID: SA15.27851

Amount of Each Receipt this Period
238.29

Refund - overpayment of utilities

SUBTOTAL of Receipts This Page (optional)	1269.61
TOTAL This Period (last page this line number only)	1269.61

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Advantage	Transaction ID: SB21B.27959
	Mailing Address 1611 N. Kent Street, STE 905	Date of Disbursement MM / DD / YYYY 02 / 07 / 2007
	City Arlington State VA Zip Code 22209	Amount of Each Disbursement this Period 1268.94
	Purpose of Disbursement GOTV calls	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) APC	Transaction ID: SB21B.27896
	Mailing Address 6470 East Johns Crossing Suite 100	Date of Disbursement MM / DD / YYYY 02 / 15 / 2007
	City Duluth State GA Zip Code 30097	Amount of Each Disbursement this Period 126.63
	Purpose of Disbursement Conference calls	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) City of Madison Treasurer	Transaction ID: SB21B.27927
	Mailing Address 215 Martin Luther King Blvd	Date of Disbursement MM / DD / YYYY 02 / 21 / 2007
	City Madison State WI Zip Code 53701	Amount of Each Disbursement this Period 155.99
	Purpose of Disbursement Personal property taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1551.56
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Expedia	Transaction ID: SB21B.27906
	Mailing Address 3150 139th Avenue SE	Date of Disbursement MM / DD / YYYY 01 / 03 / 2007
	City Bellvue State WA Zip Code 98005	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement Travel service fee	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Globalwide Gifts	Transaction ID: SB21B.27905
	Mailing Address PO Box 346	Date of Disbursement MM / DD / YYYY 12 / 28 / 2006
	City Jordan State NY Zip Code 13080	Amount of Each Disbursement this Period -11.86
	Purpose of Disbursement Crystal elephant refund to CC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Great Dane Brewery	Transaction ID: SB21B.27912
	Mailing Address 123 E Doty St	Date of Disbursement MM / DD / YYYY 01 / 08 / 2007
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 75.89
	Purpose of Disbursement Staff lunch	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 52

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) Terry Kohler</p> <p>Mailing Address 630 Riverfront Drive</p> <p>City Sheboygan State WI Zip Code 53082</p> <p>Purpose of Disbursement Flight reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27961</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2595.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center</p> <p>Mailing Address PO Box 3052</p> <p>City Milwaukee State WI Zip Code 53201</p> <p>Purpose of Disbursement CC late fee/finance charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27908</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="48.68"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center</p> <p>Mailing Address PO Box 3052</p> <p>City Milwaukee State WI Zip Code 53201</p> <p>Purpose of Disbursement Credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27903</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="753.36"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3348.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.27871
	Mailing Address P.O. Box 5920	Date of Disbursement MM / DD / YYYY 02 / 14 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 221.87
	Purpose of Disbursement Bank fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.27962
	Mailing Address P.O. Box 5920	Date of Disbursement MM / DD / YYYY 02 / 14 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 5.00
	Purpose of Disbursement Bank fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.27869
	Mailing Address P.O. Box 5920	Date of Disbursement MM / DD / YYYY 02 / 12 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 480.20
	Purpose of Disbursement Credit card processing fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	707.07
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
M&I Merchant Services

Transaction ID: SB21B.27960
Date of Disbursement

Mailing Address P.O. Box 5920

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	0	7

City Madison State WI Zip Code 53705

Amount of Each Disbursement this Period

12.95

Purpose of Disbursement
credit card processing fees

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Madison Concourse Hotel

Transaction ID: SB21B.27910
Date of Disbursement

Mailing Address 1 West Dayton Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	0	7

City Madison State WI Zip Code 53705

Amount of Each Disbursement this Period

42.50

Purpose of Disbursement
Staff refreshments

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Milwaukee Athletic Club

Transaction ID: SB21B.27913
Date of Disbursement

Mailing Address 411 E Wisconsin Ave Ste 600

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

City Milwaukee State WI Zip Code 53202

Amount of Each Disbursement this Period

1053.37

Purpose of Disbursement
Finance committee meeting

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1066.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: SB21B.27907 Date of Disbursement 01 / 02 / 2007
	Mailing Address 1 Northwest Rd	Amount of Each Disbursement this Period 256.61
	City Livonia State MI Zip Code 48152-3938	
	Purpose of Disbursement Staff airfare	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: SB21B.27909 Date of Disbursement 01 / 02 / 2007
	Mailing Address 1 Northwest Rd	Amount of Each Disbursement this Period 256.61
	City Livonia State MI Zip Code 48152-3938	
	Purpose of Disbursement Staff airfare	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27904 Date of Disbursement 12 / 16 / 2006
	Mailing Address #774100, 4100 Solutions Center	Amount of Each Disbursement this Period 19.95
	City Chicago State IL Zip Code 60677-4001	
	Purpose of Disbursement Credit card processing fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) Scott Poole</p> <p>Mailing Address 445 West Gilman #202</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.27952</p> <p>Date of Disbursement 02 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 498.25</p>
<p>B. Full Name (Last, First, Middle Initial) PostMaster</p> <p>Mailing Address PO Box 7005</p> <p>City Madison State WI Zip Code 53707</p> <p>Purpose of Disbursement Business reply mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.27865</p> <p>Date of Disbursement 02 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) PostMaster</p> <p>Mailing Address PO Box 7005</p> <p>City Madison State WI Zip Code 53707</p> <p>Purpose of Disbursement Business reply mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.27930</p> <p>Date of Disbursement 02 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2498.25

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.27866 Date of Disbursement MM / DD / YYYY 02 / 07 / 2007
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 2175.00
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Financel mailing postage - not FEA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.27918 Date of Disbursement MM / DD / YYYY 02 / 15 / 2007
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 20000.00
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Finance mailing - not FEA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Walmart	Transaction ID: SB21B.27911 Date of Disbursement MM / DD / YYYY 01 / 04 / 2007
	Mailing Address 4198 Nakoosa Trail	Amount of Each Disbursement this Period 54.98
	City Madison State WI Zip Code 53714	
	Purpose of Disbursement Office supplies	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	22175.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue - Sls Tax

Mailing Address PO Box 93389

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Sales/Use tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.27928

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2007

Amount of Each Disbursement this Period

681.69

SUBTOTAL of Disbursements This Page (optional)

681.69

TOTAL This Period (last page this line number only)

32028.25

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Transaction ID: SB26.27925

Date of Disbursement

Mailing Address P.O. Box 5920

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

City State Zip Code
Madison WI 53705

Amount of Each Disbursement this Period

7000.00

Purpose of Disbursement
Payment on LOC Principal

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Oneida Tribe of Indians

Mailing Address PO Box 365

City Oneida State WI Zip Code 54155

Purpose of Disbursement
Refund of amt over contribution limit

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A.27963

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 52

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) American Funds Service Company Mailing Address PO Box 6164 City Indianapolis State IN Zip Code 46206 Purpose of Disbursement Employee Simple IRA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.27893 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7	Amount of Each Disbursement this Period 1309.68
B.	Full Name (Last, First, Middle Initial) American Funds Service Company Mailing Address PO Box 6164 City Indianapolis State IN Zip Code 46206 Purpose of Disbursement Employee Simple IRA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.27934 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 1160.37
C.	Full Name (Last, First, Middle Initial) American Funds Service Company Mailing Address PO Box 6164 City Indianapolis State IN Zip Code 46206 Purpose of Disbursement Employee Simple IRA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.27935 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 248.77

SUBTOTAL of Disbursements This Page (optional)	2718.82
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.27881 Date of Disbursement 02 / 15 / 2007
	Mailing Address 250 Femrite Drive	Amount of Each Disbursement this Period 913.30
	City Madison State WI Zip Code 53716	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.27946 Date of Disbursement 02 / 28 / 2007
	Mailing Address 250 Femrite Drive	Amount of Each Disbursement this Period 581.08
	City Madison State WI Zip Code 53716	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Norman Dawson	Transaction ID: SB30B.27870 Date of Disbursement 02 / 14 / 2007
	Mailing Address PO Box 698	Amount of Each Disbursement this Period 154.13
	City Wycena State WI Zip Code 53969	
	Purpose of Disbursement Payroll garnishment	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1648.51
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Norman Dawson

Transaction ID: SB30B.27936
Date of Disbursement

Mailing Address PO Box 698

/ /

City Wyocena State WI Zip Code 53969

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll garnishment

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Dean Care

Transaction ID: SB30B.27931
Date of Disbursement

Mailing Address PO Box 88610

/ /

City Milwaukee State WI Zip Code 53288

Amount of Each Disbursement this Period

Purpose of Disbursement
Health insurance

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Richard Dickie

Transaction ID: SB30B.27882
Date of Disbursement

Mailing Address 126 North Blair Street #1

/ /

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.27947 Date of Disbursement 02 / 28 / 2007
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1149.96
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jason Gammeter	Transaction ID: SB30B.27883 Date of Disbursement 02 / 15 / 2007
	Mailing Address 367 East Monroe St	Amount of Each Disbursement this Period 616.54
	City Wycena State WI Zip Code 53969	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jason Gammeter	Transaction ID: SB30B.27948 Date of Disbursement 02 / 28 / 2007
	Mailing Address 367 East Monroe St	Amount of Each Disbursement this Period 303.98
	City Wycena State WI Zip Code 53969	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2070.48
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Guardian

Transaction ID: SB30B.27929
Date of Disbursement

Mailing Address PO Box 95101

/ /

City Chicago State IL Zip Code 60694

Amount of Each Disbursement this Period

Purpose of Disbursement
Dental insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Donna Heimbach

Transaction ID: SB30B.27884
Date of Disbursement

Mailing Address 3002 Dianne Drive

/ /

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Donna Heimbach

Transaction ID: SB30B.27949
Date of Disbursement

Mailing Address 3002 Dianne Drive

/ /

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
IRS

Transaction ID: SB30B.27891
Date of Disbursement

Mailing Address Payment Center

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

City State Zip Code
Kansas City MO 64999

Amount of Each Disbursement this Period

7098.16

Purpose of Disbursement
Payroll tax

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
IRS

Transaction ID: SB30B.27957
Date of Disbursement

Mailing Address Payment Center

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

City State Zip Code
Kansas City MO 64999

Amount of Each Disbursement this Period

6755.72

Purpose of Disbursement
Payroll tax

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mark Jefferson

Transaction ID: SB30B.27872
Date of Disbursement

Mailing Address 1678 Cottonville Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

City State Zip Code
Arkdale WI 54613

Amount of Each Disbursement this Period

948.49

Purpose of Disbursement
Payroll

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

14802.37

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.27937 Date of Disbursement 02 / 28 / 2007
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 2143.54
	City Arkdale State WI Zip Code 54613	
	Purpose of Disbursement Payroll	
	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.	Full Name (Last, First, Middle Initial) Juston Johnson	Transaction ID: SB30B.27873 Date of Disbursement 02 / 15 / 2007
	Mailing Address 820 Williamson Street	Amount of Each Disbursement this Period 1309.11
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	
	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:	

C.	Full Name (Last, First, Middle Initial) Juston Johnson	Transaction ID: SB30B.27938 Date of Disbursement 02 / 28 / 2007
	Mailing Address 820 Williamson Street	Amount of Each Disbursement this Period 1407.93
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	4860.58
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Kimberly Jorns</p> <p>Mailing Address 233 N. Broadway #136</p> <p>City De Pere State WI Zip Code 54115</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27874</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1732.02"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kimberly Jorns</p> <p>Mailing Address 233 N. Broadway #136</p> <p>City De Pere State WI Zip Code 54115</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27939</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1657.39"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brian Kind</p> <p>Mailing Address 6403 Alison Ln</p> <p>City Madison State WI Zip Code 53711</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27875</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1706.24"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5095.65"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.27940 Date of Disbursement 02 / 28 / 2007
	Mailing Address 6403 Alison Ln	Amount of Each Disbursement this Period 1650.95
	City Madison State WI Zip Code 53711	
	Purpose of Disbursement Payroll	
	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.	Full Name (Last, First, Middle Initial) Kirsten Kukowski	Transaction ID: SB30B.27876 Date of Disbursement 02 / 15 / 2007
	Mailing Address 3029 Maple Valley Drive #201	Amount of Each Disbursement this Period 1100.44
	City Madison State WI Zip Code 53719	
	Purpose of Disbursement Payroll	
	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:	

C.	Full Name (Last, First, Middle Initial) Kirsten Kukowski	Transaction ID: SB30B.27941 Date of Disbursement 02 / 28 / 2007
	Mailing Address 3029 Maple Valley Drive #201	Amount of Each Disbursement this Period 1127.62
	City Madison State WI Zip Code 53719	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	3879.01
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Larry Loomis	Transaction ID: SB30B.27885 Date of Disbursement 02 / 15 / 2007
	Mailing Address 3157 Muir Field Road #47	Amount of Each Disbursement this Period 589.93
	City Madison State WI Zip Code 53719	
	Purpose of Disbursement Payroll	
	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.	Full Name (Last, First, Middle Initial) Larry Loomis	Transaction ID: SB30B.27950 Date of Disbursement 02 / 28 / 2007
	Mailing Address 3157 Muir Field Road #47	Amount of Each Disbursement this Period 360.71
	City Madison State WI Zip Code 53719	
	Purpose of Disbursement Payroll	
	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:	

C.	Full Name (Last, First, Middle Initial) Ryan Mahoney	Transaction ID: SB30B.27877 Date of Disbursement 02 / 15 / 2007
	Mailing Address 7608 Hamilton Spring Rd	Amount of Each Disbursement this Period 255.86
	City Bethesda State MD Zip Code 20817	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1206.50
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Ryan Mahoney

Transaction ID: SB30B.27942

Date of Disbursement

Mailing Address 7608 Hamilton Spring Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

City State Zip Code
Bethesda MD 20817

Amount of Each Disbursement this Period

209.21

Purpose of Disbursement
Payroll

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Kathryn Mize

Transaction ID: SB30B.27878

Date of Disbursement

Mailing Address 414 N Livingston Street #2

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

City State Zip Code
Madison WI 53703

Amount of Each Disbursement this Period

1726.71

Purpose of Disbursement
Payroll

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Kathryn Mize

Transaction ID: SB30B.27943

Date of Disbursement

Mailing Address 414 N Livingston Street #2

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

City State Zip Code
Madison WI 53703

Amount of Each Disbursement this Period

1772.48

Purpose of Disbursement
Payroll

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

3708.40

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jeffery Noltner</p> <p>Mailing Address 1543 Langley Lane</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27886</p> <p>Date of Disbursement 02 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 197.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jeffery Noltner</p> <p>Mailing Address 1543 Langley Lane</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27951</p> <p>Date of Disbursement 02 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 101.31</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sherrie Osegard</p> <p>Mailing Address 2346 Talc Trail #208</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27879</p> <p>Date of Disbursement 02 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 970.76</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1269.60

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) Sherrie Osegard</p> <p>Mailing Address 2346 Talc Trail #208</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27944</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="970.75"/></p>
<p>B. Full Name (Last, First, Middle Initial) Scott Poole</p> <p>Mailing Address 445 West Gilman #202</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27887</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="743.06"/></p>
<p>C. Full Name (Last, First, Middle Initial) Karoline Rezin</p> <p>Mailing Address 5329 Old Middleton Rd, Apt. 202</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27880</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="270.12"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1983.93"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Karoline Rezin</p> <p>Mailing Address 5329 Old Middleton Rd, Apt. 202</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27945</p> <p>Date of Disbursement 02 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 131.60</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) James Sanders</p> <p>Mailing Address 4510 Texas Trail</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27888</p> <p>Date of Disbursement 02 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 621.11</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) James Sanders</p> <p>Mailing Address 4510 Texas Trail</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27954</p> <p>Date of Disbursement 02 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 357.25</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1109.96

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Charles Triller</p> <p>Mailing Address 609 East Gorham St #14</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27889</p> <p>Date of Disbursement 02 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 787.38</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Charles Triller</p> <p>Mailing Address 609 East Gorham St #14</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27955</p> <p>Date of Disbursement 02 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 426.90</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rick Wiley</p> <p>Mailing Address 529 Aztalan Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.27858</p> <p>Date of Disbursement 02 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 2094.59</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3308.87

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 44 / 52

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Rick Wiley	Transaction ID: SB30B.27863
	Mailing Address 529 Aztalan Drive	Date of Disbursement MM / DD / YYYY 02 / 06 / 2007
	City Madison State WI Zip Code 53718	Amount of Each Disbursement this Period 2094.58
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rick Wiley	Transaction ID: SB30B.27864
	Mailing Address 529 Aztalan Drive	Date of Disbursement MM / DD / YYYY 02 / 06 / 2007
	City Madison State WI Zip Code 53718	Amount of Each Disbursement this Period 2094.58
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joshua Wilson	Transaction ID: SB30B.27890
	Mailing Address 641 West Main Street	Date of Disbursement MM / DD / YYYY 02 / 15 / 2007
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 680.56
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4869.72
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

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

Transaction ID: SB30B.27956
Date of Disbursement

Mailing Address 641 West Main Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue

Transaction ID: SB30B.27892
Date of Disbursement

Mailing Address PO Box 93208

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	7	

City Milwaukee State WI Zip Code 53293

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue

Transaction ID: SB30B.27958
Date of Disbursement

Mailing Address PO Box 93208

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

City Milwaukee State WI Zip Code 53293

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

3187.89

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

67489.23

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 46 / 52 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan 110000.00	Cumulative Payment To Date 106423.74	Balance Outstanding at Close of This Period 3576.26
--------------------------------------	---	--

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 01 09 2002	04/30/08	8.25 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="3576.26"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 47 / 52 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">34000.00</div>	Cumulative Payment To Date <div style="border: 1px solid black; padding: 2px; text-align: center;">10300.00</div>	Balance Outstanding at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">23700.00</div>
---	--	---

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
<div style="border: 1px solid black; padding: 2px;">MM 12 DD 31 YYYY 2003</div>	<div style="border: 1px solid black; padding: 2px;">4/30/08</div>	<div style="border: 1px solid black; padding: 2px;">8.25 % (apr)</div>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>

SUBTOTALS This Period This Page (optional)	<div style="border: 1px solid black; padding: 2px; text-align: center;">23700.00</div>
TOTALS This Period (last page in this line only)	<div style="border: 1px solid black; padding: 2px; text-align: center;">27276.26</div>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9001309			Allocated Activity or Event Year-To-Date 17823.29		
City Louisville	State KY	Zip Code 40290-1309	Date MM / DD / YYYY 02 / 15 / 2007		
Purpose of Disbursement: Local phone service			Transaction ID: H4.27897		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.75		356.78		495.53

B. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9001309			Allocated Activity or Event Year-To-Date 19508.73		
City Louisville	State KY	Zip Code 40290-1309	Date MM / DD / YYYY 02 / 15 / 2007		
Purpose of Disbursement: Long distance phone charges			Transaction ID: H4.27898		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.92		1213.52		1685.44

C. Full Name (Last, First, Middle Initial) Earthscapes			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 683			Allocated Activity or Event Year-To-Date 19803.73		
City Marshall	State WI	Zip Code 53559	Date MM / DD / YYYY 02 / 15 / 2007		
Purpose of Disbursement: Snow removal			Transaction ID: H4.27899		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.60		212.40		295.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
693.27		1782.70		2475.97

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) GFC Leasing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1129			Allocated Activity or Event Year-To-Date 20370.03		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>		
Madison	WI	53701	Transaction ID: H4.27901		
Purpose of Disbursement: Copier lease			Category/Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.56		407.74		566.30

B. Full Name (Last, First, Middle Initial) Gordon Flesch Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 992			Allocated Activity or Event Year-To-Date 20601.23		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>		
Madison	WI	53701	Transaction ID: H4.27902		
Purpose of Disbursement: Copier toner			Category/Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.74		166.46		231.20

C. Full Name (Last, First, Middle Initial) Neenah Springs			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9			Allocated Activity or Event Year-To-Date 20659.27		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>		
Oxford	WI	53952	Transaction ID: H4.27914		
Purpose of Disbursement: Bottled water			Category/Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.25		41.79		58.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
239.55		615.99		855.54

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 85460			Allocated Activity or Event Year-To-Date 22159.27																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4.27915			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	2	/	1	5	/	2	0	0	7																
Louisville	KY	40285																							
Purpose of Disbursement: Postage meter postage			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.00		1080.00		1500.00

B. Full Name (Last, First, Middle Initial) Pro One Janitorial Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 22659.27																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4.27916			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	2	/	1	5	/	2	0	0	7																
Menasha	WI	54952																							
Purpose of Disbursement: Janitorial services			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

C. Full Name (Last, First, Middle Initial) Waste Management			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 9001505			Allocated Activity or Event Year-To-Date 22766.41																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4.27919			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	2	/	1	5	/	2	0	0	7																
Louisville	KY	40290																							
Purpose of Disbursement: Waste removal			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		77.14		107.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
590.00		1517.14		2107.14

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1900 South 18th Ave			Allocated Activity or Event Year-To-Date 25909.91		
City West Bend	State WI	Zip Code 53095	Date M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7		
Purpose of Disbursement: Building Insurance			Transaction ID: H4.27922		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
880.18		2263.32		3143.50

B. Full Name (Last, First, Middle Initial) ITS Pay My Bill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7720 Rivers Edge Drive			Allocated Activity or Event Year-To-Date 26179.12		
City Columbus	State OH	Zip Code 43235	Date M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7		
Purpose of Disbursement: Field office TDS telephone bill			Transaction ID: H4.27932		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.38		193.83		269.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
955.56		2457.15		3412.71

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
2478.38		6372.98		8851.36

Image# 28930013063

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit
