



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Mike Gallagher for Wisconsin**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	250414.69	1888271.09
(b) Total Contribution Refunds (from Line 20(d)) .....	19617.16	43067.16
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	230797.53	1845203.93
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	204288.60	811588.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	149.09
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	204288.60	811438.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2051190.38	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Mike Gallagher for Wisconsin

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	151343.72	1328005.99
(ii) Unitemized.....	28570.97	73115.10
(iii) TOTAL of contributions from individuals ▶	179914.69	1401121.09
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	70500.00	487150.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	250414.69	1888271.09
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	159407.71
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	149.09
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	5544.17	15698.05
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	255958.86	2063525.94

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	204288.60	811588.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	19617.16	36467.16
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	19617.16	43067.16
21. OTHER DISBURSEMENTS .....	2000.00	2000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	225905.76	856655.18

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2021137.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	255958.86
25. SUBTOTAL (add Line 23 and Line 24).....	2277096.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	225905.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2051190.38

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

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

FOR LINE NUMBER: PAGE 5 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**ANDERSON, GAY, R., ,**  
Mailing Address 5382 CR G

City WINNECONNE State WI Zip Code 54986-9741

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 21 / 2020

Transaction ID : SA11A.11710

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANDERSON, HEATHER, , ,**  
Mailing Address P.O. BOX 88

City ECHRIAM State WI Zip Code 54211-0088

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 01 / 2020

Transaction ID : SA11A.11408

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANDERSON, JOHN, R., ,**  
Mailing Address 330 SPRING CREEK RD

City ROCKFORD State IL Zip Code 61107-1035

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

Name of Employer ANDERSON ENTERPRISES LLC Occupation CEO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 27 / 2020

Transaction ID : SA11A.11348

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 121	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**ANDERSON, JOHN, R., ,**

Mailing Address 330 SPRING CREEK RD

City ROCKFORD	State IL	Zip Code 61107-1035
------------------	-------------	------------------------

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

Name of Employer ANDERSON ENTERPRISES LLC	Occupation CEO
--	-------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 27 / 2020

**Transaction ID : SA11A.11349**

Amount of Each Receipt this Period  
1200.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BERNAUER, TIMOTHY, , ,**

Mailing Address 13 PINTAIL PL

City APPLETON	State WI	Zip Code 54913-8068
------------------	-------------	------------------------

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

Name of Employer RADIOLOGY ASSOCIATES OF APPLETON	Occupation RADIOLOGIST - MD
--	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 21 / 2020

**Transaction ID : SA11A.11228**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BERTLER, LISA, L., ,**

Mailing Address 660 MAPLE VIEW CT

City ONEIDA	State WI	Zip Code 54155-9276
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 21 / 2020

**Transaction ID : SA11A.11257**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**BOSCO, JOHN, , ,**

Mailing Address 4231 WILLOW BROOK RD

City DEPERE State WI Zip Code 54115-9232

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

Name of Employer AMG Occupation PHYSICIAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

Transaction ID : SA11A.11292

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRIODY, LORETTA, , ,**

Mailing Address 2424 WOODVIEW LN

City MARINETTE State WI Zip Code 54143-4043

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

Transaction ID : SA11A.11625

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BROGAN, FRANCIS, , ,**

Mailing Address 4608 ROCKWOOD PKWY NW

City WASHINGTON State DC Zip Code 20016-3207

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

Name of Employer HILLTOP HOSPITALITY LLC Occupation BUSINESS OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 05 / 2020

Transaction ID : SA11A.11551

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3200.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**BROWN, J. , MICHAEL, ,**

Mailing Address 2487 LOST DAUPHIN ROAD

City DE PERE State WI Zip Code 54115-9168

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2020

Transaction ID : SA11A.11654

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CALAWERTS, MICHAEL, , ,**

Mailing Address 133 GARDEN GATE CT

City GREEN BAY State WI Zip Code 54313-4703

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

Name of Employer VER HALEN, INC. Occupation OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

Transaction ID : SA11A.11291

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CALDWELL, JOSEPH, , ,**

Mailing Address 400 GRANTS MILL RIDGE

City LEEDS State AL Zip Code 35094-3306

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2020

Transaction ID : SA11A.10812

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

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

950.00



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

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

FOR LINE NUMBER: PAGE 9 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**CATLIN, JAMES, K., ,**  
 Mailing Address **W5447 MIELKE RD**  
 City **MENASHA** State **WI** Zip Code **54952-9737**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **NONE** Occupation **RETIRED**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 12 / 2020**  
**Transaction ID : SA11A.10925**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**CATSIMATISIS, ANDREA, J., ,**  
 Mailing Address **817 5TH STREET**  
 City **NEW YORK** State **NY** Zip Code **10065-7254**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 13 / 2020**  
**Transaction ID : SA11A.10867**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**CATSIMATISIS, ANDREA, J., ,**  
 Mailing Address **817 5TH STREET**  
 City **NEW YORK** State **NY** Zip Code **10065-7254**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 13 / 2020**  
**Transaction ID : SA11A.10868**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5850.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES, DAVID, R., ,**  
 Mailing Address 5846 SHORE ACRES RD  
 City NEW FRANKEN State WI Zip Code 54229-9481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CASH DEPOT Occupation OWNER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020  
**Transaction ID : SA11A.11455**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTBAUM, JAMES, , ,**  
 Mailing Address P.O. BOX 591  
 City STURGEON BAY State WI Zip Code 54235-0591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 320.40

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2020  
**Transaction ID : SA11A.10834**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTBAUM, JAMES, , ,**  
 Mailing Address P.O. BOX 591  
 City STURGEON BAY State WI Zip Code 54235-0591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 320.40

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2020  
**Transaction ID : SA11A.11378**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 121  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**CLOUD, WALTER, J., ,**

Mailing Address 500 TERRAVIEW DR

City GREEN BAY	State WI	Zip Code 54301-1444
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FEC ID number of contributing federal political committee. **C**

Name of Employer STRIVE ORTHOPEDICS	Occupation CEO
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

**Transaction ID : SA11A.11703**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CULLEN, LAURIE, , ,**

Mailing Address 4450 INDIAN TRAIL

City GREEN BAY	State WI	Zip Code 54313-6799
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

**Transaction ID : SA11A.11520**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAHLIN, ALYCE, , ,**

Mailing Address 2670 GOOD SHEPARD LANE

City GREEN BAY	State WI	Zip Code 54313-4700
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

**Transaction ID : SA11A.10984**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4800.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**DAHLIN, BERNARD, E., MR.,**  
Mailing Address 2670 GOOD SHEPHERD LN  
City GREEN BAY State WI Zip Code 54313-4700  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NICHOLS PAPER Occupation PRESIDENT  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020  
Transaction ID : SA11A.10983  
Amount of Each Receipt this Period  
2800.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DARROW, RUSSELL, M., , JR.**  
Mailing Address 4664 CEDAR PARK DR  
City WEST BEND State WI Zip Code 53095-9147  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RUSS DARROW GROUP Occupation CHAIRMAN/CEO  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 20 / 2020  
Transaction ID : SA11A.11284  
Amount of Each Receipt this Period  
24.00  
 Memo Item  
CONTRIBUTION  
REFUNDED \$24.00 ON 02/24/2020

**C.** Full Name (Last, First, Middle Initial)  
**DARROW, RUSSELL, M., , JR.**  
Mailing Address 4664 CEDAR PARK DR  
City WEST BEND State WI Zip Code 53095-9147  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RUSS DARROW GROUP Occupation CHAIRMAN/CEO  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2020  
Transaction ID : SA11A.11469  
Amount of Each Receipt this Period  
2800.00  
 Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5624.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**DARROW, RUSSELL, M., , JR.**

Mailing Address 4664 CEDAR PARK DR

City WEST BEND State WI Zip Code 53095-9147

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

Name of Employer RUSS DARROW GROUP Occupation CHAIRMAN/CEO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020

Transaction ID : SA11A.11614

Amount of Each Receipt this Period  
2600.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**DARROW, RUSSELL, M., , JR.**

Mailing Address 4664 CEDAR PARK DR

City WEST BEND State WI Zip Code 53095-9147

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

Name of Employer RUSS DARROW GROUP Occupation CHAIRMAN/CEO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020

Transaction ID : SA11A.11615

Amount of Each Receipt this Period  
- 2600.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**DEGNAN, DEBORAH , , ,**

Mailing Address 6192 GULF OF MEXICO DR.

City LONGBOAT KEY State FL Zip Code 34228-1509

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2020

Transaction ID : SA11A.11550

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**DUPPLER, TIA, , ,**

Mailing Address 9 WOODBURY

City: APPLETON State: WI Zip Code: 54913-7111

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

Transaction ID : SA11A.11700

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELFNER, ELIOT, , DR.,**

Mailing Address 3240 BITTER CT

City: GREEN BAY State: WI Zip Code: 54301-1545

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2020

Transaction ID : SA11A.11409

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FABRY, VICTORIA, , MS.,**

Mailing Address 999 LOMBARDI AVENUE

City: GREEN BAY State: WI Zip Code: 54304-3735

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
202.40

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 29 / 2020

Transaction ID : SA11A.11422

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**FAIRCHILD, GARY, L., ,**  
 Mailing Address 1444 FOX RIVER DR  
 City DE PERE State WI Zip Code 54115-2435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**FAIRCHILD EQUIPMENT CHAIRMAN**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2020  
**Transaction ID : SA11A.11314**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**FENLON, JOHN, W., ,**  
 Mailing Address 207 N GREEN BAY RD  
 City APPLETON State WI Zip Code 54911-5516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**NONE RETIRED**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2020  
**Transaction ID : SA11A.11303**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**FERGUSON, KAYLEEN, H., ,**  
 Mailing Address 940 CAPE MARCO #706  
 City MARCO ISLAND State FL Zip Code 34145-6325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**NONE RETIRED**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2020  
**Transaction ID : SA11A.11714**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2900.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**FINN, BRIAN, , ,**

Mailing Address 420 W 25TH ST  
#4E

City NEW YORK State NY Zip Code 10001-6536

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

Name of Employer FIN CAPITAL Occupation FUND MANAGER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2020

Transaction ID : SA11A.10777

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FINN, TIMOTHY, , ,**

Mailing Address 1310 SKIPWITH RD

City MCLEAN State VA Zip Code 22101-1834

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

Name of Employer JONESDAY Occupation LAWYER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2020

Transaction ID : SA11A.10778

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FINN, TIMOTHY, , ,**

Mailing Address 1310 SKIPWITH RD

City MCLEAN State VA Zip Code 22101-1834

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

Name of Employer JONESDAY Occupation LAWYER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 21 / 2020

Transaction ID : SA11A.10779

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

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

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

4000.00



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

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

FOR LINE NUMBER: PAGE 17 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**FRIEDMAN, JAMES, , ,**

Mailing Address 10203 N WILDWOOD CT

City MEQUON State WI Zip Code 53092-2997

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

Name of Employer QUARLES & BRADY LLP Occupation ATTORNEY

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.10967

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FRIGO, FRAN, CHAPMAN, ,**

Mailing Address 1245 OUTWARD AVE

City DE PERE State WI Zip Code 54115-1822

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.11162

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FULWILER, TERRANCE, R., MR.,**

Mailing Address N7879 WILLOW DR

City ALGOMA State WI Zip Code 54201-9699

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.10965

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
SEE REATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1550.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**FULWILER, KRIS, , ,**  
 Mailing Address **N7879 WILLOW DRIVE**

City **ALGOMA** State **WI** Zip Code **54201-9699**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020

**Transaction ID : SA11A.11613**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**CONTRIBUTION**  
 REATTRIBUTION FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**FULWILER, TERRANCE, R., MR.,**  
 Mailing Address **N7879 WILLOW DR**

City **ALGOMA** State **WI** Zip Code **54201-9699**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020

**Transaction ID : SA11A.11613B**

Amount of Each Receipt this Period  
 - 1000.00

Memo Item  
**CONTRIBUTION**  
 REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**GENTINE, LOUIE, , ,**  
 Mailing Address **W6607 SANDSTONE LN**

City **PLYMOUTH** State **WI** Zip Code **53073-3435**

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

Name of Employer **SARGENTO FOODS** Occupation **EXECUTIVE**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020

**Transaction ID : SA11A.11552**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
**CONTRIBUTION**  
 REFUNDED \$2,500.00 ON 03/24/2020

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**GENTINE, LOUIS, P., ,**  
Mailing Address **PO BOX 747**

City <b>ELKHART LAKE</b>	State <b>WI</b>	Zip Code <b>53020-0747</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2020**

**Transaction ID : SA11A.11299**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**GENTINE, LOUIS, P., ,**  
Mailing Address **PO BOX 747**

City <b>ELKHART LAKE</b>	State <b>WI</b>	Zip Code <b>53020-0747</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2020**

**Transaction ID : SA11A.11300**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**GENTRY, JAMES, O'C., , III**  
Mailing Address **3303 ALABAMA AVENUE**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22305-1735</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>O'BRIEN, GENTRY &amp; SCOTT, LLC</b>	Occupation <b>PARTNER</b>
---	------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2020**

**Transaction ID : SA11A.11667**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

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

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

**6600.00**

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

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

FOR LINE NUMBER: PAGE 20 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**GOLDMAN, MARC, , ,**

Mailing Address **BOX 8020**

City **GARDEN CITY** State **NY** Zip Code **11530-8020**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2020**

**Transaction ID : SA11A.11383**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**  
**REFUNDED \$2,800.00 ON 03/31/2020**

**B.** Full Name (Last, First, Middle Initial)  
**GRUESEN, MICHAEL, , DR.,**

Mailing Address **1324 S SEDONA CIRCLE**

City **HOBART** State **WI** Zip Code **54155-8658**

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

Name of Employer **GBAA** Occupation **PHYSICIAN**

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2020**

**Transaction ID : SA11A.11453**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**GULLING, DANIEL, , MR.,**

Mailing Address **PO BOX 100**

City **PALMETTO** State **FL** Zip Code **34220-0100**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2020**

**Transaction ID : SA11A.11657**

Amount of Each Receipt this Period  
**1800.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **5600.00**

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

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

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

FOR LINE NUMBER: PAGE 21 OF 121  
(check only one)

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

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)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**GUO, DANZHU, , ,**

Mailing Address 2521 MEADOW BREEZE CT

City GREEN BAY	State WI	Zip Code 54311-9006
-------------------	-------------	------------------------

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

Name of Employer BAYCARE CLINIC	Occupation PHYSICIAN
------------------------------------	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

**Transaction ID : SA11A.11518**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HALRON, MICHAEL, L., ,**

Mailing Address 4350 OAK CLIFF CT

City ONEIDA	State WI	Zip Code 54155-3400
----------------	-------------	------------------------

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

Name of Employer HARLON LUBRICANTS INC	Occupation PRESIDENT
---	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

**Transaction ID : SA11A.11052**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HARRIS, ROBERT, JEFFREY , MR.,**

Mailing Address 18235 W BURLEIGH RD

City BROOKFIELD	State WI	Zip Code 53045-2524
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 16 / 2020

**Transaction ID : SA11A.11670**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4300.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 121	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**HERTOG, SUSAN, , ,**

Mailing Address 1040 5TH AVE.

City NEW YORK	State NY	Zip Code 10028-0137
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2020

**Transaction ID : SA11A.11099**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2800.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HIGGINS, TIM, , ,**

Mailing Address 909 CAMBRIDGE CT

City APPLETON	State WI	Zip Code 54915-2970
------------------	-------------	------------------------

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

Name of Employer CHIRHO SERVICES	Occupation CONSULTANT
-------------------------------------	--------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2020

**Transaction ID : SA11A.11382**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HOMEL, LINDA, , ,**

Mailing Address 1140 PLEASANT VALLEY DR.

City HOBART	State WI	Zip Code 54155-8634
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2020

**Transaction ID : SA11A.11620**

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

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 4050.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 23 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**HONISH, JOHN, S.,**  
Mailing Address 451 JACKSON ST

City OCONTO State WI Zip Code 54153-1458

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2020

Transaction ID : SA11A.11293

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

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HORAK, DAVID, , DR.,**  
Mailing Address 1821 W REID DR.

City APPLETON State WI Zip Code 54914-5103

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2020

Transaction ID : SA11A.11407

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HOWARD, JUDETH, , ,**  
Mailing Address 1631 LOST DAUPHIN ROAD

City DE PERE State WI Zip Code 54115-1919

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2020

Transaction ID : SA11A.11439

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► \_\_\_\_\_ 1100.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**HOWLETT, THOMAS, , ,**

Mailing Address 1370 FOXRIVER DR

City DE PERE    State WI    Zip Code 54115-2403

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2625.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.11021

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HOWLETT, THOMAS, , ,**

Mailing Address 1370 FOXRIVER DR

City DE PERE    State WI    Zip Code 54115-2403

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2625.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

Transaction ID : SA11A.11702

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

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

Mailing Address 580 24TH AVE

City CUMBERLAND    State WI    Zip Code 54829-9421

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.10784

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 725.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 25 OF 121	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**JOHNSON, JEFFREY, D., MR.,**

Mailing Address PO BOX 530

City EGG HARBOR	State WI	Zip Code 54209-0530
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

**Transaction ID : SA11A.11125**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KATZMAN, WILLIAM, , ,**

Mailing Address 4393 SOUTH 92ND STREET

City FRANKLIN	State WI	Zip Code 53132-
------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2020

**Transaction ID : SA11A.11406**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KEARNY, FRANK, J., , III**

Mailing Address 103 LIMEKILN DR

City NEENAH	State WI	Zip Code 54956-4213
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

**Transaction ID : SA11A.11294**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 26 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**KISER, JOHN, P., MR.,**  
Mailing Address 2688 VISSERS COURT

City GREEN BAY State WI Zip Code 54313-5856

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

Name of Employer UNK Occupation UNK

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2020

Transaction ID : SA11A.11651

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KJORLIE, MARK, M., ,**  
Mailing Address 1019 OVIATT ST

City KAUKAUNA State WI Zip Code 54130-1532

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

Name of Employer EXPRA SPECIALTY SOULTIONS Occupation MANAGER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020

Transaction ID : SA11A.10918

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KJORLIE, MARK, M., ,**  
Mailing Address 1019 OVIATT ST

City KAUKAUNA State WI Zip Code 54130-1532

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

Name of Employer EXPRA SPECIALTY SOULTIONS Occupation MANAGER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2020

Transaction ID : SA11A.11347

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**KLINSKY, STEVEN, BRUCE, ,**  
 Mailing Address 787 SEVENTH AVENUE, 49TH FLOOR  
 City NEW YORK State NY Zip Code 10019-6018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NEW MOUNTAIN CAPITAL CEO  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2020  
**Transaction ID : SA11A.11765**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KOSTELNIK, MIKE, , ,**  
 Mailing Address 432 LINNERUD DR4  
 City SUN PRAIRIE State WI Zip Code 53590-2924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2020  
**Transaction ID : SA11A.11400**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KRIETE, DAVID, , ,**  
 Mailing Address 141 NORTH WATER STREET  
 23 23  
 City MILWAUKEE State WI Zip Code 53202-6024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KRIETE TRUCK CENTERS COMMERCIAL TRUCK SALES  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2020  
**Transaction ID : SA11A.11399**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4050.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 28 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**KUEHN, TIMOTHY, J.,**  
Mailing Address 3565 THREE PENNY CT.  
City DE PERE State WI Zip Code 54115-  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
KUEHN PROPERTIES & DEVELOPMENT OWNER  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 04 2020  
**Transaction ID : SA11A.11473**  
Amount of Each Receipt this Period  
250.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LAVIOLETTE, RENEE, L. , MRS. ,**  
Mailing Address 2260 SUNNY LANE  
City GREEN BAY State WI Zip Code 54313-7819  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
THE LAVIOLETTE GROUP VICE PRESIDENT  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 12 2020  
**Transaction ID : SA11A.10924**  
Amount of Each Receipt this Period  
150.00  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LEVINE, ERIC, , MR. ,**  
Mailing Address 16 RANDOM FARMS CIR  
City CHAPPAQUA State NY Zip Code 10514-1000  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
EISEMAN LEVINE ET AL ATTORNEY  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 05 2020  
**Transaction ID : SA11A.10770**  
Amount of Each Receipt this Period  
800.00  
 Memo Item  
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 29 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**LIPSEY, SUZANNE H, H., ,**

Mailing Address P.O. BOX 7795

City AVON State CO Zip Code 81620-7795

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 362.12

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2020

**Transaction ID : SA11A.10809**

Amount of Each Receipt this Period  
 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LIPSEY, SUZANNE H, H., ,**

Mailing Address P.O. BOX 7795

City AVON State CO Zip Code 81620-7795

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 362.12

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2020

**Transaction ID : SA11A.10816**

Amount of Each Receipt this Period  
 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LOVELL, SALLY, , ,**

Mailing Address 312 BRAEBOURNE COURT

City GREEN BAY State WI Zip Code 54301-1968

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

Name of Employer SELF EMPLOYED Occupation OFFICE MANAGER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2020

**Transaction ID : SA11A.11653**

Amount of Each Receipt this Period  
 400.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**MCGRATH, JOSEPH, M., MR.,**  
Mailing Address **E 1350 HUNTERS RIDGE**

City **WAUPACA** State **WI** Zip Code **54981-**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 29 / 2020**

**Transaction ID : SA11A.11427**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MEHLMAN, KENNETH, B.,**  
Mailing Address **9 WEST 57TH ST  
STE 4200**

City **NEW YORK** State **NY** Zip Code **10019-2707**

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

Name of Employer **KKR** Occupation **HEAD OF PUBLIC RELATIONS**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2800.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 12 / 2020**

**Transaction ID : SA11A.10972**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MOORE, BRIAN, P.,**  
Mailing Address **824 W FRONT STREET**

City **APPLETON** State **WI** Zip Code **54914-5465**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**400.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2020**

**Transaction ID : SA11A.11295**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3250.00**

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

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

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

FOR LINE NUMBER: PAGE 31 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**MORSTAD, STEVEN, , MR. ,**

Mailing Address **W7919 SMOCK VALLEY RD**

City **MONROE** State **WI** Zip Code **53566-9164**

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

Name of Employer **PDF SOLUTIONS, INC.** Occupation **SENIOR DIRECTOR**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2020**

**Transaction ID : SA11A.11384**

Amount of Each Receipt this Period  
**220.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MURPHY, PATRICK, R., MR. ,**

Mailing Address **780 PARKVIEW RD**

City **GREEN BAY** State **WI** Zip Code **54304-5779**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 21 / 2020**

**Transaction ID : SA11A.11226**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MUTH, RICHARD, J., ,**

Mailing Address **P.O. BOX E**

City **STANTON** State **CA** Zip Code **90680-0075**

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

Name of Employer **ORCO BLOCK AND HARDSCAPE** Occupation **PRESIDENT**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 28 / 2020**

**Transaction ID : SA11A.10767**

Amount of Each Receipt this Period  
**300.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **620.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 121	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. NINIVAGGI, JENNIFER, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2020	
Mailing Address 611 W RIVER RD			<b>Transaction ID : SA11A.11235</b>	
City APPLETON	State WI	Zip Code 54915-1258	Amount of Each Receipt this Period _____ 2800.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5600.00		

Full Name (Last, First, Middle Initial) <b>B. NINIVAGGI, JENNIFER, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2020	
Mailing Address 611 W RIVER RD			<b>Transaction ID : SA11A.11236</b>	
City APPLETON	State WI	Zip Code 54915-1258	Amount of Each Receipt this Period _____ 2800.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION REFUNDED \$2,800.00 ON 03/20/2020	
Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5600.00		

Full Name (Last, First, Middle Initial) <b>C. NORTHROP, KAREN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 14 / 2020	
Mailing Address 4471 DAISY PATCH RD			<b>Transaction ID : SA11A.11067</b>	
City FISH CREEK	State WI	Zip Code 54212-9435	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer MSM LTD.		Occupation OWNER		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 5850.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____



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

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

FOR LINE NUMBER: PAGE 33 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**O'BRIEN, TIMOTHY, J., ,**

Mailing Address 1116 N. FERNMEADOW DR.

City: APPLETON State: WI Zip Code: 54915-2830

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.10930

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**O'HARROW, CALVIN, R., ,**

Mailing Address 5858 WOOD BROOK CIR

City: LITTLE SUAMICO State: WI Zip Code: 54141-9310

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 31 / 2020

Transaction ID : SA11A.10881

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**OBBERMEIER, RUSSELL, , ,**

Mailing Address W9489 AFFELDT RD

City: NEW LONDON State: WI Zip Code: 54961-9244

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2020

Transaction ID : SA11A.11658

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 34 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**OBMA, PADRAIC, R., ,**

Mailing Address 628 SUNSET CIR

City GREEN BAY State WI Zip Code 54301-1346

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

Name of Employer STRIVE ORTHOPEDICS Occupation SURGEON

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2020

Transaction ID : SA11A.11708

Amount of Each Receipt this Period  
 1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**OLEJNICZAK, THOMAS, M., ,**

Mailing Address 1543 FOX RIDGE CT

City DE PERE State WI Zip Code 54115-1907

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

Name of Employer LAW FIRM OF CONWAY, OLEJNICZAK, AND Occupation ATTORNEY

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020

Transaction ID : SA11A.11452

Amount of Each Receipt this Period  
 250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**OLSHAN, MICHAEL, E., ,**

Mailing Address 12 E 13TH ST

City NEW YORK State NY Zip Code 10003-4406

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

Name of Employer O-CORP INVESTMENTS LP Occupation INVESTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2020

Transaction ID : SA11A.10763

Amount of Each Receipt this Period  
 2800.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4050.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**OLSHAN, MICHAEL, E.,**  
Mailing Address 12 E 13TH ST  
City NEW YORK State NY Zip Code 10003-4406  
FEC ID number of contributing federal political committee. **C**  
Name of Employer O-CORP INVESTMENTS LP Occupation INVESTOR  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 28 / 2020  
Transaction ID : SA11A.10764  
Amount of Each Receipt this Period  
2800.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PARKER, ALEXANDRA, , ,**  
Mailing Address 314 LYTTON AVE STE 200  
City PALO ALTO State CA Zip Code 94301-1430  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF-EMPLOYED Occupation ARTIST  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020  
Transaction ID : SA11A.11639  
Amount of Each Receipt this Period  
2800.00  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PARKER, ALEXANDRA, , ,**  
Mailing Address 314 LYTTON AVE STE 200  
City PALO ALTO State CA Zip Code 94301-1430  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF-EMPLOYED Occupation ARTIST  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020  
Transaction ID : SA11A.11640  
Amount of Each Receipt this Period  
2800.00  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 36 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**PARKER, SEAN, , ,**  
 Mailing Address 314 LYTTON AVE, STE 200  
 City PALO ALTO State CA Zip Code 94301-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEAN N PARKER FOUNDATION Occupation CHAIRMAN  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11A.11633**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**PARKER, SEAN, , ,**  
 Mailing Address 314 LYTTON AVE, STE 200  
 City PALO ALTO State CA Zip Code 94301-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEAN N PARKER FOUNDATION Occupation CHAIRMAN  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11A.11634**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**PAUL, SHANNON , L., ,**  
 Mailing Address 628 25TH ST. S  
 City ARLINGTON State VA Zip Code 22202-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer O'BRIEN, GENTRY & SCOTT, LLC Occupation PARTNER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2020  
**Transaction ID : SA11A.11617**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

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

6600.00

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

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

FOR LINE NUMBER: PAGE 37 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**PERRY, LAURI, , ,**

Mailing Address 642 E 17TH AVE

City SALT LAKE CITY State UT Zip Code 84103-3709

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
215.10

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 09 / 2020

Transaction ID : SA11A.10791

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PERRY, LAURI, , ,**

Mailing Address 642 E 17TH AVE

City SALT LAKE CITY State UT Zip Code 84103-3709

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
215.10

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 19 / 2020

Transaction ID : SA11A.10802

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PHILLIPS, ANTHONY, W., MR.,**

Mailing Address 7463 N PURDY PKWY

City APPLETON State WI Zip Code 54913-7512

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

Name of Employer THEDA CARE Occupation PHYSICIAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1950.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 31 / 2020

Transaction ID : SA11A.10776

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 121	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**PICHLER, MARGARET, M., ,**

Mailing Address 2576 S TRILLIUM CIR

City GREEN BAY	State WI	Zip Code 54313-4941
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2020

**Transaction ID : SA11A.11701**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 400.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PLEVA, ROBERT, M., ,**

Mailing Address 3281 E THOMPSON AVE

City ST. FRANCIS	State WI	Zip Code 53235-4921
---------------------	-------------	------------------------

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

Name of Employer ALLIANT INDUSTRIES	Occupation OWNER
--	---------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020

**Transaction ID : SA11A.1127**

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

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PRESENT, BARBARA, L., ,**

Mailing Address 826 SCHERER AVE

City OCONTO	State WI	Zip Code 54153-1110
----------------	-------------	------------------------

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

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2020

**Transaction ID : SA11A.10783**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 39 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**PRESENT, BARBARA, L., ,**

Mailing Address 826 SCHERER AVE

City OCONTO State WI Zip Code 54153-1110

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation N/A

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2020

Transaction ID : SA11A.11446

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PROSSER, THOMAS, J., ,**

Mailing Address 1028 SURREY CT

City NEENAH State WI Zip Code 54956-4232

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1090.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 13 / 2020

Transaction ID : SA11A.10861

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PROSSER, THOMAS, J., ,**

Mailing Address 1028 SURREY CT

City NEENAH State WI Zip Code 54956-4232

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1090.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.10922

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER: PAGE 40 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**PROSSER, THOMAS, J., ,**  
Mailing Address 1028 SURREY CT

City: NEENAH State: WI Zip Code: 54956-4232

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1090.00

Date of Receipt: 02 / 21 / 2020  
Transaction ID : SA11A.11230

Amount of Each Receipt this Period: 5.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PROSSER, THOMAS, J., ,**  
Mailing Address 1028 SURREY CT

City: NEENAH State: WI Zip Code: 54956-4232

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1090.00

Date of Receipt: 03 / 06 / 2020  
Transaction ID : SA11A.11526

Amount of Each Receipt this Period: 200.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PUDNER, JOHN, , ,**  
Mailing Address 761 SHELTON LN.

City: AUBURN State: AL Zip Code: 36830-3359

FEC ID number of contributing federal political committee: C

Name of Employer: TAKE BACK Occupation: EXEC. DIRECTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 02 / 14 / 2020  
Transaction ID : SA11A.11043

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1205.00

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



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

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

FOR LINE NUMBER: PAGE 41 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**RAATHS, BILL, , ,**

Mailing Address 1234 LAKESHORE DRIVE

City MENASHA State WI Zip Code 54952-1322

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2020

Transaction ID : SA11A.11402

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RESCH, RICHARD, J., ,**

Mailing Address 1330 BELLEVUE STREET

City GREEN BAY State WI Zip Code 54302-2119

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

Name of Employer KI Occupation CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2020

Transaction ID : SA11A.11536

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
PENDING RE-ATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROSENKRANZ, ROBERT, , ,**

Mailing Address 590 MADISON AVENUE, 30TH FLOOR

City NEW YORK State NY Zip Code 10022-8547

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

Name of Employer DELPHI CAPITAL MANAGEMENT Occupation CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020

Transaction ID : SA11A.10985

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

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

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

4800.00

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

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

FOR LINE NUMBER: PAGE 42 OF 121  
(check only one)

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

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)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**ROSENKRANZ, ROBERT, , ,**

Mailing Address 590 MADISON AVENUE, 30TH FLOOR

City NEW YORK	State NY	Zip Code 10022-8547
------------------	-------------	------------------------

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

Name of Employer DELPHI CAPITAL MANAGEMENT	Occupation CHAIRMAN
---	------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020

Transaction ID : SA11A.10986

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2800.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROURKE, MARK, B., ,**

Mailing Address 323 GRANDEUR OAKS CT

City DE PERE	State WI	Zip Code 54115-8476
-----------------	-------------	------------------------

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

Name of Employer SCHNEIDER NATIONAL INC.	Occupation EXECUTIVE
---	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2020

Transaction ID : SA11A.11241

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHEUNEMANN, RANDALL, J., ,**

Mailing Address P.O. BOX 2426

City COLUMBIA FALLS	State MT	Zip Code 59912-2426
------------------------	-------------	------------------------

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

Name of Employer ORION STRATEGIES	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2020

Transaction ID : SA11A.10754

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3300.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 43 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**SCHMIDT, KAREN, , ,**  
 Mailing Address 2085 SANDALWOOD CT  
 City GREEN BAY State WI Zip Code 54304-1947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11A.11546**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHMIDT, KAREN, , ,**  
 Mailing Address 2085 SANDALWOOD CT  
 City GREEN BAY State WI Zip Code 54304-1947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11A.11547**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHNEIDER, PATRICIA, A., ,**  
 Mailing Address 3316 VISTA RD  
 City GREEN BAY State WI Zip Code 54301-2634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020  
**Transaction ID : SA11A.11123**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 121	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**SCHNEIDER, PATRICIA, A., ,**

Mailing Address 3316 VISTA RD

City GREEN BAY	State WI	Zip Code 54301-2634
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020

**Transaction ID : SA11A.11622**

Amount of Each Receipt this Period  
 2700.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHNEIDER, PATRICIA, A., ,**

Mailing Address 3316 VISTA RD

City GREEN BAY	State WI	Zip Code 54301-2634
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020

**Transaction ID : SA11A.11623**

Amount of Each Receipt this Period  
 100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHUMACHER, THOMAS, M., ,**

Mailing Address 2001 LOST DAUPHIN RD

City DE PERE	State WI	Zip Code 54115-1605
-----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2020

**Transaction ID : SA11A.11525**

Amount of Each Receipt this Period  
 400.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3200.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 45 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**SCHWARZ, GAYE, H., ,**  
Mailing Address 2251 GULF OF MEXICO DR. #402

City: LONGBOAT KEY State: FL Zip Code: 34228-3203

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2020

Transaction ID : SA11A.11668

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHWAN, TIM, , ,**  
Mailing Address 5399 N PROVIDENCE AVE

City: APPLETON State: WI Zip Code: 54913-8089

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: CONSULTANT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 04 / 2020

Transaction ID : SA11A.10773

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SHADE, ROBERT, A., ,**  
Mailing Address 3224 VISTA ROAD

City: GREEN BAY State: WI Zip Code: 54301-2632

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2020

Transaction ID : SA11A.11531

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2750.00

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

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

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

FOR LINE NUMBER: PAGE 46 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**SMITH, SHAWN, B., ,**  
 Mailing Address 2800 6TH AVE  
 City FT WORTH State TX Zip Code 76110-3011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MOTOROLA SOLUTIONS INC. Occupation SENIOR DIRECTOR OF VAAS  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 10600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2020  
**Transaction ID : SA11A.11549**  
 Amount of Each Receipt this Period  
 5600.00  
 Memo Item  
 CONTRIBUTION  
 PENDING RE-ATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SMYTH, JEROME, E., MR.,**  
 Mailing Address 2342 OLD PLANK RD  
 City DE PERE State WI Zip Code 54115-8618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SCHREIBER FOODS Occupation GENERAL COUNSEL  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2020  
**Transaction ID : SA11A.11545**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SPOERL, ROBERT, , ,**  
 Mailing Address E900 TAMMY TRAIL  
 City WAUPACA State WI Zip Code 54981-9523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2020  
**Transaction ID : SA11A.11652**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION  
 SEE REDESIGNATION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7600.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 47 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**SPOERL, ROBERT, , ,**

Mailing Address **E900 TAMMY TRAIL**

City **WAUPACA** State **WI** Zip Code **54981-9523**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**3500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 11 / 2020**

**Transaction ID : SA11A.11720**

Amount of Each Receipt this Period  
**- 700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**SPOERL, ROBERT, , ,**

Mailing Address **E900 TAMMY TRAIL**

City **WAUPACA** State **WI** Zip Code **54981-9523**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**3500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 11 / 2020**

**Transaction ID : SA11A.11721**

Amount of Each Receipt this Period  
**700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**STELLRECHT, GREG, , ,**

Mailing Address **N6838 BUILDERS CT**

City **HOLMEN** State **WI** Zip Code **54636-9367**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**230.52**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 04 / 2020**

**Transaction ID : SA11A.10771**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **100.00**

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

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

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

FOR LINE NUMBER: PAGE 48 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**STRONG, WILLIAM , , ,**

Mailing Address 3753 FORT CHARLES DR.

City NAPLES State FL Zip Code 34102-7934

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

Name of Employer LONGFORD CAPITAL MANAGEMENT, LP Occupation INVESTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2020

Transaction ID : SA11A.11283

Amount of Each Receipt this Period  
 2800.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SUR, LARRY, M., ,**

Mailing Address 10541 GLEN LAKES

City BONITA SPRINGS State FL Zip Code 34135-7237

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

Name of Employer SUR & ASSOCIATES Occupation CONSULTANT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2020

Transaction ID : SA11A.11660

Amount of Each Receipt this Period  
 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TEICHHOLTZ, COLIN, , ,**

Mailing Address 116 W 14TH ST  
APT #4

City NEW YORK State NY Zip Code 10011-7305

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

Name of Employer ELEMENT CAPITAL Occupation INVESTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2020

Transaction ID : SA11A.10775

Amount of Each Receipt this Period  
 20.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3820.00

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



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

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

FOR LINE NUMBER: PAGE 49 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**TEICHHOLTZ, COLIN, , ,**

Mailing Address 116 W 14TH ST  
APT #4

City NEW YORK State NY Zip Code 10011-7305

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

Name of Employer ELEMENT CAPITAL Occupation INVESTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 04 / 2020

Transaction ID : SA11A.10885

Amount of Each Receipt this Period  
2780.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TOENJES, WAYNE, A., ,**

Mailing Address 1104 FLINTS RD

City WAUSAU State WI Zip Code 54401-4583

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

Name of Employer MAJOR INDUSTRIES Occupation OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

Transaction ID : SA11A.11302

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TOONEN, TONYA, , ,**

Mailing Address 2600 GOOD SHEPARD LN

City GREEN BAY State WI Zip Code 54313-4700

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 18 / 2020

Transaction ID : SA11A.11220

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4030.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**UTRIE, JOHN, W., , JR.**

Mailing Address 980 THORBERRY CREEK DR

City ONEIDA    State WI    Zip Code 54155-8626

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

Name of Employer AUROA    Occupation PHYSICIAN

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2020

Transaction ID : SA11A.11121

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VAN HANDEL, PAMELA, J., ,**

Mailing Address 1916 GRANT ST

City LITTLE CHUTE    State WI    Zip Code 54140-1223

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

Name of Employer FOX CITIES MACHINING INC.    Occupation OWNER

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020

Transaction ID : SA11A.11458

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VENNERS, THEODORE, , ,**

Mailing Address 2001 BANNIE AVE

City LAS VEGAS    State NV    Zip Code 89102-2208

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2020

Transaction ID : SA11A.11548

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

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 2000.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 121  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**WEST, JOHN, E., ,**

Mailing Address 1119 CROWN POINTE CIRCLE

City SUAMICO State WI Zip Code 54173-8087

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

Name of Employer FOX VALLEY METAL TECH Occupation ENGINEER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11A.10920

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WEST, JOHN, E., ,**

Mailing Address 1119 CROWN POINTE CIRCLE

City SUAMICO State WI Zip Code 54173-8087

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

Name of Employer FOX VALLEY METAL TECH Occupation ENGINEER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2020

Transaction ID : SA11A.11450

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WHITMAN, ROBERT, W., ,**

Mailing Address 3474 BAY HIGHLANDS DR

City GREEN BAY State WI Zip Code 54311-7318

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

Transaction ID : SA11A.11077

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

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

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

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

FOR LINE NUMBER: PAGE 52 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**WICKMAN, MICHAEL, P., ,**

Mailing Address 333 KRESS CT

City GREEN BAY State WI Zip Code 54301-1967

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2020

Transaction ID : SA11A.11522

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALLIANCE OF BANKERS FOR WISCONSIN**

Mailing Address PO BOX 8880  
WSEB #900017

City MADISON State WI Zip Code 53708-8880

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6417.80

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020

Transaction ID : SA11A.11621

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**FLYNN, PHILIP, , MR.,**

Mailing Address 2607 LOST DAUPHIN RD

City DE PERE State WI Zip Code 54115-9172

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

Name of Employer ASSOCIATED BANK Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2020

Transaction ID : SA11A.11649

Amount of Each Receipt this Period  
1400.00

Memo Item CONTRIBUTION

EARMARKED FROM ALLIANCE OF BANKERS FOR WISCONSIN

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2400.00

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

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

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

FOR LINE NUMBER: PAGE 53 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**GOLDE, LOIS, , ,**

Mailing Address 2607 LOST DAUPHIN ROAD

City DE PERE State WI Zip Code 54115-9172

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

Name of Employer ASSOCIATED BANK Occupation BANKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2020

Transaction ID : SA11A.11648

Amount of Each Receipt this Period  
1400.00

Memo Item  
CONTRIBUTION

EARMARKED FROM ALLIANCE OF BANKERS FOR WISCONSIN

**B.** Full Name (Last, First, Middle Initial)  
**ONEIDA NATION**

Mailing Address P.O. BOX 365

City ONEIDA State WI Zip Code 54155-0365

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2020

Transaction ID : SA11A.11249

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**REALTORS DIRECT GIVER PROGRAM CONDUIT ACCOUNT**

Mailing Address 4801 FOREST RUN RD, STE 201

City MADISON State WI Zip Code 53704-3291

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020

Transaction ID : SA11A.11451

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4200.00

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

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

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

FOR LINE NUMBER: PAGE 54 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**PFEFFERLE, JOHN, E., ,**  
 Mailing Address 18 S SUNNYSLOPE CT  
 City APPLETON State WI Zip Code 54914-4803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation REALTOR  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020  
**Transaction ID : SA11A.11500**  
 Amount of Each Receipt this Period  
 175.00  
 Memo Item  
**CONTRIBUTION**  
 EARMARKED FROM REALTORS DIRECT GIVER PROGRAM CONDUIT ACCOUNT

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3471.89

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2020  
**Transaction ID : SA11C.10837**  
 Amount of Each Receipt this Period  
 205.00  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**PERRY, LAURI, , ,**  
 Mailing Address 642 E 17TH AVE  
 City SALT LAKE CITY State UT Zip Code 84103-3709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 215.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2020  
**Transaction ID : SA11A.10847**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item  
**CONTRIBUTION**  
 EARMARKED FROM WINRED

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

185.00

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

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

FOR LINE NUMBER: PAGE 55 OF 121  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3471.89

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 04 / 2020

**Transaction ID : SA11C.10848**

Amount of Each Receipt this Period  
70.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTBAUM, JAMES, , ,**

Mailing Address P.O. BOX 591

City STURGEON BAY State WI Zip Code 54235-0591

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
320.40

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 31 / 2020

**Transaction ID : SA11A.10849**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3471.89

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

**Transaction ID : SA11C.11116**

Amount of Each Receipt this Period  
295.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25.00

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

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

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

FOR LINE NUMBER: PAGE 56 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**HOGAN, MARK, , ,**

Mailing Address 2510 N. 90TH STREET

City WAUWATOSA State WI Zip Code 53226-1812

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 08 / 2020

Transaction ID : SA11A.11119

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer NONE Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3471.89

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2020

Transaction ID : SA11C.11385

Amount of Each Receipt this Period  
1328.00

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**WARPINSKI M.D., JOSEPH, , ,**

Mailing Address 7071 BAY SHORE DR.

City EGG HARBOR State WI Zip Code 54209-9058

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 19 / 2020

Transaction ID : SA11A.11388

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 57 OF 121	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C** **C00694323**

Name of Employer	Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**3471.89**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

**Transaction ID : SA11C.11553**

Amount of Each Receipt this Period  

838.89
--------

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**FEINSTEIN, LINDA , , ,**

Mailing Address **233 SOUTH WACKER DRIVE SUITE 5900**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60606-6361</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>DENTONS</b>	Occupation <b>ATTORNEY</b>
------------------------------------	-------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**600.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

**Transaction ID : SA11A.11557**

Amount of Each Receipt this Period  

250.00
--------

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**LIPSEY, SUZANNE H, H., ,**

Mailing Address **P.O. BOX 7795**

City <b>AVON</b>	State <b>CO</b>	Zip Code <b>81620-7795</b>
---------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**362.12**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

**Transaction ID : SA11A.11568**

Amount of Each Receipt this Period  

4.86
------

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<b>254.86</b>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 58 OF 121  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**RAWSON, KAY, , ,**

Mailing Address 19255 WOODLANDS DRIVE

City HUNTINGTON BEACH State CA Zip Code 92648-5558

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 29 2020

Transaction ID : SA11A.11595

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3471.89

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 17 2020

Transaction ID : SA11C.11672

Amount of Each Receipt this Period  
105.23

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**LIPSEY, SUZANNE H, H., ,**

Mailing Address P.O. BOX 7795

City AVON State CO Zip Code 81620-7795

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
362.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 07 2020

Transaction ID : SA11A.11691

Amount of Each Receipt this Period  
4.86

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	104.86
<b>TOTAL</b> This Period (last page this line number only).....▶	151343.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**EISEN FOR CONGRESS, INC.**

Mailing Address PO BOX 45

City SHIRLEY State NY Zip Code 11967-0045

FEC ID number of contributing federal political committee. **C** C00723437

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 21 / 2020

**Transaction ID : SA11C.11715**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ACADIA HEALTHCARE COMPANY INC. FEDPAC**

Mailing Address 6100 TOWER CIRCLE ROAD SUITE 1000

City FRANKLIN State TN Zip Code 37067-1509

FEC ID number of contributing federal political committee. **C** C00496919

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 18 / 2020

**Transaction ID : SA11C.11224**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION INTERNATIONAL PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 18 / 2020

**Transaction ID : SA11C.11214**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**ALLIANT ENERGY CORPORATION EMPLOYEE'S POLITICAL ACTION COMM**

Mailing Address 801 PENNSYLVANIA AVE, NW  
SUITE 640

City WASHINGTON State DC Zip Code 20004-2693

FEC ID number of contributing federal political committee. **C** C00132092

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 04 / 2020

**Transaction ID : SA11C.11459**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 25 / 2020

**Transaction ID : SA11C.11753**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 27 / 2020

**Transaction ID : SA11C.11763**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COMPANIES ACEC PAC**

Mailing Address 1015 15TH STREET NW  
SUITE 802

City WASHINGTON State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 21 / 2020

**Transaction ID : SA11C.11245**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL P**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

**Transaction ID : SA11C.11301**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTE**

Mailing Address 2000 WESTCHESTER AVENUE

City PURCHASE State NY Zip Code 10577-2538

FEC ID number of contributing federal political committee. **C** C00478099

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2020

**Transaction ID : SA11C.11468**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERH**

Mailing Address 101 CONSTIUTION AVENUE, NW  
10TH FLOOR WEST

City WASHINGTON	State DC	Zip Code 20001-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2020

**Transaction ID : SA11C.11756**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COMCAST AND NBCUNIVERSAL PAC**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103-2855
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2020

**Transaction ID : SA11C.11764**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DELTA AIR LINES POLITICAL ACTION COMMITTEE**

Mailing Address 1212 NEW YORK AVENUE NW  
SUITE 200

City WASHINGTON	State DC	Zip Code 20005-6609
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 28 / 2020

**Transaction ID : SA11C.10766**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORP PAC (ENG PAC)**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042-4511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

**Transaction ID : SA11C.11306**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS	State MO	Zip Code 63105-4204
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00219642

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

**Transaction ID : SA11C.10981**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FAA MANAGERS ASSOCIATION INC. PAC**

Mailing Address 1015 ATLANTIC BLVD.  
SUITE 245

City ATLANTIC BEACH	State FL	Zip Code 32233-3313
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00366070

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2020

**Transaction ID : SA11C.11768**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**FEDEX PAC**

Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

**Transaction ID : SA11C.11629**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FOLEY & LARDNER POLITICAL FUND**

Mailing Address 3000 K STREET NW

City WASHINGTON	State DC	Zip Code 20007-5109
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00105338

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 21 / 2020

**Transaction ID : SA11C.11713**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION PAC**

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City FALLS CHURCH	State VA	Zip Code 22042-4541
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

**Transaction ID : SA11C.11704**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A. GENERAL DYNAMICS CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2941 FAIRVIEW PARK DR.  
 SUITE 100  
 City FALLS CHURCH State VA Zip Code 22042-4541  
 FEC ID number of contributing federal political committee. **C** C00078451  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2020  
**Transaction ID : SA11C.11705**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**B. GUARDIAN LIFE FEDERAL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 HANOVER SQUARE  
 City NEW YORK State NY Zip Code 10004-2616  
 FEC ID number of contributing federal political committee. **C** C00173393  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2020  
**Transaction ID : SA11C.11308**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**C. LEONARDO DRS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2345 CRYSTAL DRIVE SUITE 1000  
 City ARLINGTON State VA Zip Code 22202-4801  
 FEC ID number of contributing federal political committee. **C** C00275123  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2020  
**Transaction ID : SA11C.11530**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**  
 Mailing Address 1325 MASSACHUSETTS AVE., NW  
 City WASHINGTON State DC Zip Code 20005-4171  
 FEC ID number of contributing federal political committee. **C** C00238725  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020  
**Transaction ID : SA11C.10973**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL MULTIFAMILY HOUSING COUNCIL PAC**  
 Mailing Address 1775 EYE ST. NW  
 SUITE 1100  
 City WASHINGTON State DC Zip Code 20006-2424  
 FEC ID number of contributing federal political committee. **C** C00130773  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020  
**Transaction ID : SA11C.10971**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND, & GRAVEL ASSOCIATION (ROCK PAC)**  
 Mailing Address 66 CANAL CENTER PLAZA  
 SUITE 300  
 City ALEXANDRIA State VA Zip Code 22314-1576  
 FEC ID number of contributing federal political committee. **C** C00089458  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11C.11632**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 67 OF 121	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**OSHKOSH CORPORATION EMPLOYEES PAC (OCEPAC)**

Mailing Address P.O. BOX 2566  
2307 OREGON STREET

City OSHKOSH State WI Zip Code 54903-2566

FEC ID number of contributing federal political committee. **C** C00304477

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2020

Transaction ID : SA11C.11662

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PROSPERITY ACTION INC.**

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : SA11C.10969

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD, NE  
BIN 10115

City ATLANTA State GA Zip Code 30308-3374

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2019

Transaction ID : SA11C.10617

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION  
SEE REDESIGNATION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 121	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD, NE  
BIN 10115

City ATLANTA State GA Zip Code 30308-3374

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : SA11C.10900**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD, NE  
BIN 10115

City ATLANTA State GA Zip Code 30308-3374

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : SA11C.10900B**

Amount of Each Receipt this Period  
- 1500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**SPACE EXPLORATION TECHNOLOGIES CORP. PAC**

Mailing Address 1030 15TH ST NW

City WASHINGTON State DC Zip Code 20005-1503

FEC ID number of contributing federal political committee. **C** C00411116

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2020

**Transaction ID : SA11C.11460**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 69 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004-2710

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2020

**Transaction ID : SA11C.11754**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TDS TELECOMMUNICATIONS CORPORATION PAC**

Mailing Address PO BOX 5158

City MADISON State WI Zip Code 53705-0158

FEC ID number of contributing federal political committee. **C** C00299750

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2020

**Transaction ID : SA11C.11350**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2020

**Transaction ID : SA11C.11457**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 70 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**THE COUNCIL OF INSURANCE AGENTS AND BROKERS POLITICAL ACTI**  
 Mailing Address 701 PENNSYLVANIA AVENUE, NW  
 SUITE 750  
 City WASHINGTON State DC Zip Code 20004-2661  
 FEC ID number of contributing federal political committee. **C** C00039578  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2020  
**Transaction ID : SA11C.11244**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE**  
 Mailing Address ONE PROCTER & GAMBLE PLAZA  
 City CINCINNATI State OH Zip Code 45202-3315  
 FEC ID number of contributing federal political committee. **C** C00257329  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2020  
**Transaction ID : SA11C.10974**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE**  
 Mailing Address ONE PROCTER & GAMBLE PLAZA  
 City CINCINNATI State OH Zip Code 45202-3315  
 FEC ID number of contributing federal political committee. **C** C00257329  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11C.11631**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICA**

Mailing Address 430 FIRST STREET SE

City: WASHINGTON State: DC Zip Code: 20003-1826

FEC ID number of contributing federal political committee: **C** C00002881

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt: 02 / 25 / 2020

Transaction ID : SA11C.11313

Amount of Each Receipt this Period: 2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address 610 S. BOULEVARD

City: TAMPA State: FL Zip Code: 33606-2647

FEC ID number of contributing federal political committee: **C** C00433060

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 6000.00

Date of Receipt: 02 / 18 / 2020

Transaction ID : SA11C.11213

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address 610 S. BOULEVARD

City: TAMPA State: FL Zip Code: 33606-2647

FEC ID number of contributing federal political committee: **C** C00433060

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 6000.00

Date of Receipt: 03 / 13 / 2020

Transaction ID : SA11C.11663

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	70500.00

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

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

FOR LINE NUMBER: PAGE 72 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**NICOLET NATIONAL BANK**  
 Mailing Address 111 N. WASHINGTON ST  
 City GREEN BAY State WI Zip Code 54301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 15553.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2020  
**Transaction ID : SA15.4234**  
 Amount of Each Receipt this Period  
 3876.69  
 Memo Item  
**INTEREST INCOME**

**B.** Full Name (Last, First, Middle Initial)  
**NICOLET NATIONAL BANK**  
 Mailing Address 111 N. WASHINGTON ST  
 City GREEN BAY State WI Zip Code 54301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 15553.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2020  
**Transaction ID : SA15.4235**  
 Amount of Each Receipt this Period  
 59.88  
 Memo Item  
**INTEREST INCOME**

**C.** Full Name (Last, First, Middle Initial)  
**NICOLET NATIONAL BANK**  
 Mailing Address 111 N. WASHINGTON ST  
 City GREEN BAY State WI Zip Code 54301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 15553.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2020  
**Transaction ID : SA15.4236**  
 Amount of Each Receipt this Period  
 1504.22  
 Memo Item  
**INTEREST INCOME**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5440.79  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 73 OF 121  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**NICOLET NATIONAL BANK**

Mailing Address 111 N. WASHINGTON ST

City GREEN BAY State WI Zip Code 54301

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15553.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 28 2020

Transaction ID : SA15.4275

Amount of Each Receipt this Period  
54.10

Memo Item  
INTEREST INCOME

**B.** Full Name (Last, First, Middle Initial)  
**NICOLET NATIONAL BANK**

Mailing Address 111 N. WASHINGTON ST

City GREEN BAY State WI Zip Code 54301

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15553.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 31 2020

Transaction ID : SA15.4370

Amount of Each Receipt this Period  
49.28

Memo Item  
INTEREST INCOME

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	103.38
<b>TOTAL</b> This Period (last page this line number only).....▶	5544.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ANDREAE, TAYLOR , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 324 KENTUCKY AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 44.70	
Purpose of Disbursement SEE MEMO ENTRIES			Transaction ID : SB17.I4368	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FEDEX</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 942 SOUTH SHADY GROVE RD			FEC Identification Number C	
City MEMPHIS	State TN	Zip Code 38119	Amount of Each Disbursement this Period 27.72	
Purpose of Disbursement SHIPPING			Transaction ID : SB17.I4386	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 555 MARKET ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 7.70	
Purpose of Disbursement TRAVEL EXPENSE			Transaction ID : SB17.I4385	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	44.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. UVC CAB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020
Mailing Address 2711 26TH STREET NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20018
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 9.28
Candidate Name		Transaction ID : SB17.I4384
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. ATKINS, MEGAN, K, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2020
Mailing Address 449 E14TH ST 11C		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10009
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 6500.00
Candidate Name		Transaction ID : SB17.I4199
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. ATKINS, MEGAN, K, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2020
Mailing Address 449 E14TH ST 11C		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10009
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 2610.00
Candidate Name		Transaction ID : SB17.I4212
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ATKINS, MEGAN, K, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2020	
Mailing Address 449 E14TH ST 11C			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10009	Amount of Each Disbursement this Period 3400.00	
Purpose of Disbursement FUNDRAISING CONSULTING			Transaction ID : SB17.I4272	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MAI, MARY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2020	
Mailing Address 352 SIDEWHEELER STREET			FEC Identification Number C	
City HENDERSON	State NV	Zip Code 89012	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement FUNDRAISING CONSULTING			Transaction ID : SB17.I4197	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAI, MARY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2020	
Mailing Address 352 SIDEWHEELER STREET			FEC Identification Number C	
City HENDERSON	State NV	Zip Code 89012	Amount of Each Disbursement this Period 57794.47	
Purpose of Disbursement FUNDRAISING CONSULTING			Transaction ID : SB17.I4198	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	66194.47
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. MAI, MARY, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2020
Mailing Address PO BOX 1027		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54305
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.I4263
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. MCNULTY, PATRICK, T, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2020
Mailing Address 1550 RIVERS BEND APT 304		FEC Identification Number C
City WAUWATOSA	State WI	Zip Code 53226
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.I4215
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. MCNULTY, PATRICK, T, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2020
Mailing Address 1550 RIVERS BEND APT 304		FEC Identification Number C
City WAUWATOSA	State WI	Zip Code 53226
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.I4247
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2020
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 108.72
Candidate Name	Category/Type	Transaction ID : SB17.I4223
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2020
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 109.50
Candidate Name	Category/Type	Transaction ID : SB17.I4224
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2020
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 437.40
Candidate Name	Category/Type	Transaction ID : SB17.I4225
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	655.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 121			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2020
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 222.34
Candidate Name	Category/ Type	Transaction ID : SB17.I4250
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2020
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 377.57
Candidate Name	Category/ Type	Transaction ID : SB17.I4257
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2020
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 114.60
Candidate Name	Category/ Type	Transaction ID : SB17.I4270
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	714.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020	
Mailing Address P.O. BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884	Amount of Each Disbursement this Period 130.58	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4276	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address PO BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884	Amount of Each Disbursement this Period 1.28	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4357	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ARENA ONLINE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2020	
Mailing Address 1780 WEST SEQUOIA VISTA CIRCLE			FEC Identification Number C	
City SALK LAKE CITY	State UT	Zip Code 84104	Amount of Each Disbursement this Period 6103.59	
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17.I4140	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6235.45
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AT EASE ADVISORS, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2020	
Mailing Address 2024 EASTWOOD AVE			FEC Identification Number C	
City JANESVILLE	State WI	Zip Code 53545	Amount of Each Disbursement this Period 30000.00	
Purpose of Disbursement CAMPAIGN MANAGEMENT		Category/ Type	Transaction ID : SB17.I4194	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AT EASE ADVISORS, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2020	
Mailing Address 2024 EASTWOOD AVE			FEC Identification Number C	
City JANESVILLE	State WI	Zip Code 53545	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CAMPAIGN MANAGEMENT		Category/ Type	Transaction ID : SB17.I4206	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AT EASE ADVISORS, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020	
Mailing Address 2024 EASTWOOD AVE			FEC Identification Number C	
City JANESVILLE	State WI	Zip Code 53545	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CAMPAIGN MANAGEMENT		Category/ Type	Transaction ID : SB17.I4238	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	40000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AT EASE ADVISORS, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 2024 EASTWOOD AVE			FEC Identification Number C	
City JANESVILLE	State WI	Zip Code 53545	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CAMPAIGN MANAGEMENT		Category/Type	Transaction ID : SB17.I4358	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2020	
Mailing Address 1593 SPRING HILL RD #400			FEC Identification Number C	
City VIENNA	State VA	Zip Code 22182	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement SOFTWARE		Category/Type	Transaction ID : SB17.I4207	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2020	
Mailing Address 1593 SPRING HILL RD #400			FEC Identification Number C	
City VIENNA	State VA	Zip Code 22182	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement SOFTWARE		Category/Type	Transaction ID : SB17.I4249	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 121			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement
Mailing Address 1593 SPRING HILL RD #400		M M / D D / Y Y Y Y 03 / 24 / 2020
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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:	Transaction ID : SB17.I4359	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. DEMOCRACY ENGINE</b>		Date of Disbursement
Mailing Address 850 QUINCY ST NW #402		M M / D D / Y Y Y Y 01 / 08 / 2020
City WASHINGTON	State DC	Zip Code 20011
Purpose of Disbursement CC TRANSACTION FEE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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:	Transaction ID : SB17.I4195	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. DEMOCRACY ENGINE</b>		Date of Disbursement
Mailing Address 850 QUINCY ST NW #402		M M / D D / Y Y Y Y 02 / 07 / 2020
City WASHINGTON	State DC	Zip Code 20011
Purpose of Disbursement CC TRANSACTION FEE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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:	Transaction ID : SB17.I4220	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1425.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 121			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRACY ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2020		
Mailing Address 850 QUINCY ST NW #402			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20011	Amount of Each Disbursement this Period 53.10		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4226		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. DEMOCRACY ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2020		
Mailing Address 850 QUINCY ST NW #402			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20011	Amount of Each Disbursement this Period 116.46		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4232		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. DEMOCRACY ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2020		
Mailing Address 850 QUINCY ST NW #402			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20011	Amount of Each Disbursement this Period 123.22		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4248		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	292.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 121			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRACY ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2020
Mailing Address 850 QUINCY ST NW #402		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20011
Purpose of Disbursement CC TRANSACTION FEE	Candidate Name	Amount of Each Disbursement this Period 187.90
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) ▼	Transaction ID : SB17.I4259
State: District:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. DEMOCRACY ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2020
Mailing Address 850 QUINCY ST NW #402		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20011
Purpose of Disbursement CC TRANSACTION FEE	Candidate Name	Amount of Each Disbursement this Period 247.90
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) ▼	Transaction ID : SB17.I4269
State: District:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. DEMOCRACY ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020
Mailing Address 850 QUINCY ST NW #402		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20011
Purpose of Disbursement CC TRANSACTION FEE	Candidate Name	Amount of Each Disbursement this Period 1.13
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) ▼	Transaction ID : SB17.I4361
State: District:	Category/Type	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	436.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 121			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. EVEREFFECT</b>		Date of Disbursement
Mailing Address 16244 CHANCELLORS RIDGE WAY		M M / D D / Y Y Y Y 03 / 01 / 2020
City WESTFIELD	State IN	Zip Code 46062
Purpose of Disbursement EVENT PHOTOGRAPHY	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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:	Transaction ID : SB17.I4262	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. FIRST CLASS STRATEGIES, LLC</b>		Date of Disbursement
Mailing Address PO BOX 541532		M M / D D / Y Y Y Y 01 / 08 / 2020
City ORLANDO	State FL	Zip Code 32804
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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:	Transaction ID : SB17.I4139	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. FIRST CLASS STRATEGIES, LLC</b>		Date of Disbursement
Mailing Address PO BOX 541532		M M / D D / Y Y Y Y 02 / 05 / 2020
City ORLANDO	State FL	Zip Code 32804
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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:	Transaction ID : SB17.I4210	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15622.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 121			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. FIRST CLASS STRATEGIES, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2020		
Mailing Address PO BOX 541532			FEC Identification Number C		
City ORLANDO	State FL	Zip Code 32804	Amount of Each Disbursement this Period 2808.84		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Transaction ID : SB17.I4271		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. IMGE, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2020		
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 3680.00		
Purpose of Disbursement DIGITAL CONSULTING		Category/Type	Transaction ID : SB17.I4196		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. IMGE, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2020		
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 3680.00		
Purpose of Disbursement DIGITAL CONSULTING		Category/Type	Transaction ID : SB17.I4227		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10168.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. IMGE, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement DIGITAL CONSULTING		Amount of Each Disbursement this Period 3680.00
Candidate Name		Transaction ID : SB17.I4362
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KIRKLAND &amp; ELLIS LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2020
Mailing Address 300 NORTH LASALLE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60654
Purpose of Disbursement EVENT CATERING		Amount of Each Disbursement this Period 600.00
Candidate Name		Transaction ID : SB17.I4211
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NICOLET NATIONAL BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2020
Mailing Address 111 N. WASHINGTON ST		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54301
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 34.30
Candidate Name		Transaction ID : SB17.I4213
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4314.30
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. NICOLET NATIONAL BANK CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address PO BOX 84006		FEC Identification Number C
City COLUMBUS	State GA	Zip Code 31908
Purpose of Disbursement SEE MEMO ENTRIES		Amount of Each Disbursement this Period 8592.73
Candidate Name		Transaction ID : SB17.I4214
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement AIRFARE		Amount of Each Disbursement this Period 1260.30
Candidate Name		Transaction ID : SB17.I4285
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 60 MASSACHUSETTS AVE NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 507.00
Candidate Name		Transaction ID : SB17.I4286
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8592.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 123.06	
Purpose of Disbursement CATERING EXPENSE			Transaction ID : SB17.I4287	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CHARLIE PALMER STEAKHOUSE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020	
Mailing Address 101 CONSTITUTION AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 1706.24	
Purpose of Disbursement CATERING EXPENSE			Transaction ID : SB17.I4288	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DC TAXI</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020	
Mailing Address 3399 BENNING ROAD NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20019	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement TRAVEL EXPENSE			Transaction ID : SB17.I4320	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

**A. DC TAXI**

Full Name (Last, First, Middle Initial)  
Mailing Address 3399 BENNING ROAD NE

City WASHINGTON State DC Zip Code 20019

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.I4356

Memo Item

**B. DELTA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.I4289

Memo Item

**C. FEDEX**

Full Name (Last, First, Middle Initial)  
Mailing Address 942 SOUTH SHADY GROVE RD

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 139.34

Transaction ID : SB17.I4290

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ADVERTISING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 32.60	
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) ▼	Transaction ID : SB17.I4293
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. JETBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 118-29 QUEENS BLVD		FEC Identification Number C
City FOREST HILLS	State NY	Zip Code 11375
Purpose of Disbursement AIRFARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 802.35	
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) ▼	Transaction ID : SB17.I4300
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. KUMMERS STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 1808 ALLOUEZ AVE		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54311
Purpose of Disbursement STORAGE UNIT RENTAL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 85.00	
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) ▼	Transaction ID : SB17.I4301
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. NATIONBUILDER</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020	
Mailing Address 520 S GRAND AVE			FEC Identification Number C	
City LOS ANGELES	State CA	Zip Code 90071	Amount of Each Disbursement this Period 149.00	
Purpose of Disbursement SOFTWARE		Category/ Type	Transaction ID : SB17.I4309	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NYC TAXI</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020	
Mailing Address 21-03 44TH AVE			FEC Identification Number C	
City LONG ISLAND CITY	State NY	Zip Code 11101	Amount of Each Disbursement this Period 47.27	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I4310	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SVC CAB</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020	
Mailing Address 3399 BENNING RD NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20019	Amount of Each Disbursement this Period 65.76	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I4304	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. THE ELITE GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 1641 SAND ACRES DR		FEC Identification Number C
City DE PERE	State WI	Zip Code 54115
Purpose of Disbursement PROMOTIONAL ITEMS		Amount of Each Disbursement this Period 409.00
Candidate Name		Transaction ID : SB17.I4325
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE FAIRMONT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 138 ST JAMES AVE		FEC Identification Number C
City BOSTON	State MA	Zip Code 02116
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 311.72
Candidate Name		Transaction ID : SB17.I4312
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TITLETOWN BREWING COMPANY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 200 DOUSMAN ST		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54303
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 1629.88
Candidate Name		Transaction ID : SB17.I4303
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 555 MARKET ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 120.09	
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) ▼	Transaction ID : SB17.I4299
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 475 L'ENFANT PLAZA SW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20260
Purpose of Disbursement POSTAGE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 122.65	
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) ▼	Transaction ID : SB17.I4298
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UVC CAB</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address 2711 26TH STREET NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20018
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 29.17	
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) ▼	Transaction ID : SB17.I4326
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 121			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 140 WEST ST			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10007	Amount of Each Disbursement this Period 16.53		
Purpose of Disbursement TELEPHONE		Category/Type	Transaction ID : SB17.I4297		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. W MILLAR &amp; CO CATERING</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1335 14TH ST NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20005	Amount of Each Disbursement this Period 368.12		
Purpose of Disbursement CATERING EXPENSE		Category/Type	Transaction ID : SB17.I4296		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. NICOLET NATIONAL BANK CARD SERVICES</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020		
Mailing Address PO BOX 84006			FEC Identification Number C		
City COLUMBUS	State GA	Zip Code 31908	Amount of Each Disbursement this Period 3429.41		
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type	Transaction ID : SB17.I4233		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3429.41
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement AIRFARE		Amount of Each Disbursement this Period 177.20
Candidate Name		Transaction ID : SB17.I4327
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020
Mailing Address 60 MASSACHUSETTS AVE NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 315.00
Candidate Name		Transaction ID : SB17.I4328
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 321.41
Candidate Name		Transaction ID : SB17.I4329
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

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

Mailing Address 942 SOUTH SHADY GROVE RD

City MEMPHIS    State TN    Zip Code 38119

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House     Senate     President    Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 342.62

Transaction ID : SB17.I4331

Memo Item

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

Mailing Address 14455 N HAYDEN RD #219

City SCOTTSDALE    State AZ    Zip Code 85260

Purpose of Disbursement EMAILS

Candidate Name

Office Sought:  House     Senate     President    Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 9.99

Transaction ID : SB17.I4330

Memo Item

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

Mailing Address 14455 N HAYDEN RD #219

City SCOTTSDALE    State AZ    Zip Code 85260

Purpose of Disbursement EMAILS

Candidate Name

Office Sought:  House     Senate     President    Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 425.02

Transaction ID : SB17.I4332

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 36.00	
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) ▼	Transaction ID : SB17.I4333
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. KUMMERS STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020
Mailing Address 1808 ALLOUEZ AVE		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54311
Purpose of Disbursement STORAGE UNIT RENTAL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 85.00	
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) ▼	Transaction ID : SB17.I4334
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. NATIONBUILDER</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020
Mailing Address 520 S GRAND AVE		FEC Identification Number C
City LOS ANGELES	State CA	Zip Code 90071
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 149.00	
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) ▼	Transaction ID : SB17.I4335
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. OFFICINA</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020	
Mailing Address 1120 MAINE AVE SW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20024	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement EVENT CATERING		Category/ Type	Transaction ID : SB17.I4336	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020	
Mailing Address 555 MARKET ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 185.97	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I4337	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020	
Mailing Address 555 MARKET ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 95.00	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I4341	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 121			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020		
Mailing Address 233 S WACKER DR			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 274.00		
Purpose of Disbursement AIRFARE		Category/ Type	Transaction ID : SB17.I4338		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020		
Mailing Address 475 L'ENFANT PLAZA SW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20260	Amount of Each Disbursement this Period 148.00		
Purpose of Disbursement PO BOX RENEWAL		Category/ Type	Transaction ID : SB17.I4339		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2020		
Mailing Address 140 WEST ST			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10007	Amount of Each Disbursement this Period 110.30		
Purpose of Disbursement TELEPHONE		Category/ Type	Transaction ID : SB17.I4340		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. NICOLET NATIONAL BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2020	
Mailing Address 111 N. WASHINGTON ST			FEC Identification Number C	
City GREEN BAY	State WI	Zip Code 54301	Amount of Each Disbursement this Period 83.30	
Purpose of Disbursement BANK FEE		Category/Type	Transaction ID : SB17.I4273	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NICOLET NATIONAL BANK CARD SERVICES</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020	
Mailing Address PO BOX 84006			FEC Identification Number C	
City COLUMBUS	State GA	Zip Code 31908	Amount of Each Disbursement this Period 3745.29	
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type	Transaction ID : SB17.I4283	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMAZON.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020	
Mailing Address P.O. BOX 81226			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98108	Amount of Each Disbursement this Period 142.26	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type	Transaction ID : SB17.I4343	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3828.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 205.40

Transaction ID : SB17.I4342

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 154.30

Transaction ID : SB17.I4344

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 362.26

Transaction ID : SB17.I4345

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020
Mailing Address 942 SOUTH SHADY GROVE RD		FEC Identification Number C
City MEMPHIS	State TN	Zip Code 38119
Purpose of Disbursement SHIPPING		Amount of Each Disbursement this Period 328.02
Candidate Name		Transaction ID : SB17.I4346
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 36.00
Candidate Name		Transaction ID : SB17.I4347
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HERTZ RENT- A- CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020
Mailing Address 8501 WILLIAMS RD		FEC Identification Number C
City ESTERO	State FL	Zip Code 33928
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 582.94
Candidate Name		Transaction ID : SB17.I4348
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. KUMMERS STORAGE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020	
Mailing Address 1808 ALLOUEZ AVE			FEC Identification Number C	
City GREEN BAY	State WI	Zip Code 54311	Amount of Each Disbursement this Period 85.00	
Purpose of Disbursement STORAGE UNIT RENTAL		Category/Type	Transaction ID : SB17.I4349	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MOES</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020	
Mailing Address 1275 FIRST ST NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 307.74	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : SB17.I4350	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. NATIONBUILDER</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020	
Mailing Address 520 S GRAND AVE			FEC Identification Number C	
City LOS ANGELES	State CA	Zip Code 90071	Amount of Each Disbursement this Period 149.00	
Purpose of Disbursement SOFTWARE		Category/Type	Transaction ID : SB17.I4351	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. THE MADISON CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020
Mailing Address 5 E WILSON ST		FEC Identification Number C
City MADISON	State WI	Zip Code 53703
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : SB17.I4352
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THOMPSON WASHINGTON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020
Mailing Address 221 TINGEY ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.I4353
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020
Mailing Address 140 WEST ST		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10007
Purpose of Disbursement TELEPHONE		Amount of Each Disbursement this Period 110.20
Candidate Name		Transaction ID : SB17.I4354
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S. MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 2530.00

Transaction ID : SB17.I4200

Memo Item

Full Name (Last, First, Middle Initial)  
**B. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S. MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 2554.33

Transaction ID : SB17.I4201

Memo Item

Full Name (Last, First, Middle Initial)  
**C. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S. MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 2753.62

Transaction ID : SB17.I4264

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 7837.95

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 121			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2020		
Mailing Address 510 TOWNSEND ST			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 209.17		
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4216		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2020		
Mailing Address 510 TOWNSEND ST			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 714.98		
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4217		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2020		
Mailing Address 510 TOWNSEND ST			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 264.14		
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4218		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1188.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2020	
Mailing Address 510 TOWNSEND ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 9.90	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4221	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2020	
Mailing Address 510 TOWNSEND ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 24.46	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4246	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2020	
Mailing Address 510 TOWNSEND ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 1.16	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4252	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	35.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 121			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020		
Mailing Address 510 TOWNSEND ST			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 3.99		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4268		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2020		
Mailing Address 510 TOWNSEND ST			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 1.16		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4274		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2020		
Mailing Address 510 TOWNSEND ST			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 17.16		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4366		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22.31
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. VILLAGE GRAPHICS</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2020	
Mailing Address 108 WEST CAPITOL DR			FEC Identification Number C	
City HARTLAND	State WI	Zip Code 53029	Amount of Each Disbursement this Period 604.22	
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17.I4265	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2020	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 46.34	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4219	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2020	
Mailing Address PO BOX 9891			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 12.87	
Purpose of Disbursement CC TRANSACTION FEE		Category/ Type	Transaction ID : SB17.I4222	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	663.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 41.61
Candidate Name	Category/ Type	Transaction ID : SB17.I4228
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 788.36
Candidate Name	Category/ Type	Transaction ID : SB17.I4245
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 116.20
Candidate Name	Category/ Type	Transaction ID : SB17.I4256
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	946.17
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 121	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 102.98
Candidate Name	Category/ Type	Transaction ID : SB17.I4266
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 7.17
Candidate Name	Category/ Type	Transaction ID : SB17.I4282
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 11.62
Candidate Name	Category/ Type	Transaction ID : SB17.I4369
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	121.77
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 121			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement
Mailing Address PO BOX 9891		M M / D D / Y Y Y Y 03 / 30 / 2020
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		FEC Identification Number C C00694323
Candidate Name		Amount of Each Disbursement this Period 0.68
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) ▼	Transaction ID : SB17.I4371
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.68
<b>TOTAL</b> This Period (last page this line number only).....▶	204282.54

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. CARTER, SUSAN , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020		
Mailing Address 6 EAGLE RIDGE LN			FEC Identification Number C		
City GREENVILLE	State SC	Zip Code 29615	Amount of Each Disbursement this Period 1.44		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type	Transaction ID : SB20A.I4280		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. DARROW, RUSSELL , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2020		
Mailing Address 4664 CEDAR PARK DR			FEC Identification Number C		
City WEST BEND	State WI	Zip Code 53095	Amount of Each Disbursement this Period 24.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type	Transaction ID : SB20A.I4253		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. GARCIA, MICHAEL , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020		
Mailing Address 29128 SUMMER OAK CT			FEC Identification Number C		
City VALENCIA	State CA	Zip Code 91390	Amount of Each Disbursement this Period 50.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/Type	Transaction ID : SB20A.I4244		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	75.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. GENTINE, LOUIE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2020		
Mailing Address W6607 SANDSTONE LANE			FEC Identification Number C		
City PLYMOUTH	State WI	Zip Code 53073	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Transaction ID : SB20A.I4363		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. GOLDMAN, MARC, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020		
Mailing Address PO BOX 8020			FEC Identification Number C		
City GARDEN CITY	State NY	Zip Code 11530	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Transaction ID : SB20A.I4372		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2800 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. LIPSEY, SUZANNE , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020		
Mailing Address P.O. BOX 7795			FEC Identification Number C		
City AVON	State CO	Zip Code 81620	Amount of Each Disbursement this Period 4.86		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Transaction ID : SB20A.I4281		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5304.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. LIPSEY, SUZANNE , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020		
Mailing Address P.O. BOX 7795			FEC Identification Number <b>C</b>		
City AVON	State CO	Zip Code 81620			
Purpose of Disbursement REFUND OF CONTRIBUTION			Transaction ID : <b>SB20A.I4367</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MUNSCHAUER , LYMAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020		
Mailing Address 701 2ND ST NE APT 663			FEC Identification Number <b>C</b>		
City WASHINGTON	State DC	Zip Code 20002			
Purpose of Disbursement REFUND OF CONTRIBUTION			Transaction ID : <b>SB20A.I4242</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. NINIVAGGI, JENNIFER, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020		
Mailing Address 611 W RIVER RD			FEC Identification Number <b>C</b>		
City APPLETON	State WI	Zip Code 54915			
Purpose of Disbursement REFUND OF CONTRIBUTION			Transaction ID : <b>SB20A.I4278</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2805.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. RAIH, JOHN , , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020		
Mailing Address 220 WEST 10TH STREET APT 2A					
City NEW YORK	State NY	Zip Code 10014	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION			Amount of Each Disbursement this Period 4.00		
Candidate Name			Transaction ID : SB20A.I4241		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SCHNEIDER, NICOLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2020		
Mailing Address 1625 LOST DAUPHIN RD					
City DE PERE	State WI	Zip Code 54115	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION			Amount of Each Disbursement this Period 2800.00		
Candidate Name			Transaction ID : SB20A.I4364		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SCHNEIDER, NICOLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2020		
Mailing Address 1625 LOST DAUPHIN RD					
City DE PERE	State WI	Zip Code 54115	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION			Amount of Each Disbursement this Period 2800.00		
Candidate Name			Transaction ID : SB20A.I4387		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5604.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. SCHNEIDER, PAUL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2020		
Mailing Address 1625 LOST DAUPHIN RD			FEC Identification Number C		
City DE PERE	State WI	Zip Code 54115	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Transaction ID : SB20A.I4365		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2800 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SCHNEIDER, PAUL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2020		
Mailing Address 1625 LOST DAUPHIN RD			FEC Identification Number C		
City DE PERE	State WI	Zip Code 54115	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Transaction ID : SB20A.I4388		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SINCLAIR, SANFORD, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020		
Mailing Address 379 W BROADWAY			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10012	Amount of Each Disbursement this Period 1.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Transaction ID : SB20A.I4243		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5601.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 121			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. YEO, THEODORE, V, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020		
Mailing Address 1070 HOHLFEIDER RD					
City GLENCO	State IL	Zip Code 60022	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Amount of Each Disbursement this Period 1.00		
Candidate Name		Transaction ID : SB20A.I4240			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. COUNTRY LADY</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2020		
Mailing Address 7828 HWY 42					
City EGG HARBOR	State WI	Zip Code 54209	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Amount of Each Disbursement this Period 25.00		
Candidate Name		Transaction ID : SB20A.I4360			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. FOX VALLEY INITIATIVE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020		
Mailing Address 130 MAIZE ST. APT 7					
City CLINTONVILLE	State WI	Zip Code 54929	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type	Amount of Each Disbursement this Period 200.00		
Candidate Name		Transaction ID : SB20A.I4277			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	226.00
<b>TOTAL</b> This Period (last page this line number only).....	19617.16



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 121	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Gallagher for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. TIFFANY FOR WISCONSIN, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020	
Mailing Address PO BOX 1007			FEC Identification Number C C00718635	
City WAUSAU	State WI	Zip Code 54402	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.I4239	
Candidate Name TIFFANY, TOM, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General			
State: WI	District: 07			

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

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00