

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Citizens for Tom Petri

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)).... | 56500 | 57510 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0 | 0 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 56500 | 57510 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 29939.81 | 61854.6 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0 | 0 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 29939.81 | 61854.6 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 904958.52 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Citizens for Tom Petri

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)..... | 8000 | 102027 |
| (ii) Unitemized..... | 1250 | -92767 |
| (iii) TOTAL of contributions from individuals ▶ | 9250 | 9260 |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 47250 | 48250 |
| (d) The Candidate..... | 0 | 0 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 56500 | 57510 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0 | 0 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) All Other Loans..... | 0 | 0 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0 | 0 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0 | 0 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 650.21 | 1488.39 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 57150.21 | 58998.39 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 29939.81 | 61854.6 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 41996 | 41996 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) Of All Other Loans | 0 | 0 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0 | 0 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0 | 0 |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 0 | 0 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0 | 0 |
| 21. OTHER DISBURSEMENTS | 0 | 0 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 71935.81 | 103850.6 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 919744.12 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 57150.21 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 976894.33 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 71935.81 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 904958.52 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

FEC 865970

Form/Schedule:
Transaction ID:

**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 41 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Hector & Karen Alcalde

Mailing Address 2111 Wilson Boulevard
Suite 850

City State Zip Code
Arlington VA 22201-3051

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

Name of Employer Occupation
Alcade & Fay CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48220

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Dr. G. Burton Bloch

Mailing Address N6019 Heritage Drive

City State Zip Code
Green Lake WI 54941-9481

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 02 / 2013

Transaction ID : A-C48156

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Cynthia Broydrick

Mailing Address 221 Bamboo Road

City State Zip Code
Palm Beach Shores FL 33404-5732

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

Name of Employer Occupation
Broydrick & Associates Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48263

Amount of Each Receipt this Period
500

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

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

1750.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 41 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Robert K. Dawson

Mailing Address 1214 Key Drive

City: Alexandria State: VA Zip Code: 22302-3408

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

Name of Employer: Dawson and Associates Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 01 / 25 / 2013

Transaction ID : A-C48150

Amount of Each Receipt this Period: **500**

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

Mailing Address 9417 Byeforde Road

City: Kensington State: MD Zip Code: 20895-3657

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

Name of Employer: Self Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 03 / 01 / 2013

Transaction ID : A-C48222

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Cliff Madison

Mailing Address 254A Maryland Avenue NE

City: Washington State: DC Zip Code: 20002-5750

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

Name of Employer: Cliff Madison Gov Relations Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: 01 / 25 / 2013

Transaction ID : A-C48148

Amount of Each Receipt this Period: **250**

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

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

1250.00

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 41 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

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

Mailing Address **PO Box 1176**

City **Rehoboth Beach** State **DE** Zip Code **19971-0816**

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

Name of Employer **May Group LLC** Occupation **President & CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48223

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Richard T McCormack

Mailing Address **1 Bryant Park
Floor 36**

City **New York** State **NY** Zip Code **10036-6728**

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

Name of Employer **Center for Strategic and Int** Occupation **Senior Adviser**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : A-C48157

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Kevin McDermott

Mailing Address **510 E Quail Run**

City **Oak Creek** State **WI** Zip Code **53154-5793**

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

Name of Employer **Patriot Taxways** Occupation **Principal**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48259

Amount of Each Receipt this Period
500

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

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

2000.00

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 41 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Daniel McNamara

Mailing Address 811 Milestone Drive

City State Zip Code
Silver Spring MD 20904-2710

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

Name of Employer Occupation
Cassidy & Associates Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
03 / 26 / 2013

Transaction ID : A-C48242

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Steven Palmer

Mailing Address 5827 27th Street N

City State Zip Code
Arlington VA 22207-1263

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

Name of Employer Occupation
Van Scoyoc & Associates VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48262

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Ken Presley

Mailing Address 113 W West St, Suite 4

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
United Motorcoach Assoc. Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48260

Amount of Each Receipt this Period
500

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

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

1500.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 41 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
John C Runyan

Mailing Address **8 E Street SE**

City **Washington** State **DC** Zip Code **20003-2611**

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

Name of Employer **Runyan Public Affairs** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48258

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Daniel Schiltz

Mailing Address **E1604 Canyon Creek Circle**

City **Luxemburg** State **WI** Zip Code **54217-8272**

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

Name of Employer **Kruger International** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48261

Amount of Each Receipt this Period
500

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

Mailing Address **6061 Sugarstone Court**

City **Mc Lean** State **VA** Zip Code **22101-3247**

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

Name of Employer **Alcalde & Fay** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48221

Amount of Each Receipt this Period
250

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: (check only one) | PAGE 11 OF 41 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
John Wymer Jr.

Mailing Address 1040 N Lake Shore Drive
Apt. 8C

City Chicago State IL Zip Code 60611-1107

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

Name of Employer Jack Wymer LLC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : A-C48243

Amount of Each Receipt this Period
500

B. 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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

8000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 41 |
| | <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)
Citizens for Tom Petri

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 19 / 2013

Transaction ID : A-C48162

Amount of Each Receipt this Period
2500

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48276

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
ACIPAC

Mailing Address 1775 K Street NW
Suite 500

City Washington State DC Zip Code 20006-1529

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48266

Amount of Each Receipt this Period
500

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

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

5500.00

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

| | | | | |
|---|------------------------------------|-------------------------------------|--|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 13 OF 41 | |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Avenue NW
Suite 800

City Washington State DC Zip Code 20036-2242

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48277

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Aircraft Owners & Pilots Assoc. PAC

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701-4756

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48160

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
American Beverage Licenses PAC

Mailing Address 5101 River Road
Suite 108

City Bethesda State MD Zip Code 20816-1560

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48224

Amount of Each Receipt this Period
1000

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

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

4500.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
AMFAM Pac

Mailing Address 6000 American Parkway

City Madison State WI Zip Code 53783-0001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48270

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
AT&T PAC

Mailing Address 208 S Akard Street
Front 2701

City Dallas State TX Zip Code 75202-4295

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2013

Transaction ID : A-C48147

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Automotive Aftermarket PAC

Mailing Address 7101 Wisconsin Avenue
Suite 1300

City Bethesda State MD Zip Code 20814-4866

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48269

Amount of Each Receipt this Period
1000

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

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

3000.00

**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 15 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Automotive Recyclers Association PAC

Mailing Address 9113 Church Street

City Manassas State VA Zip Code 20110-5456

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 25 / 2013

Transaction ID : A-C48152

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ball Janik Llp

Mailing Address 101 SW Main Street Suite 1100

City Portland State OR Zip Code 97204-3219

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48265

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Bechtel Pac

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105-1813

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A-C48218

Amount of Each Receipt this Period
1000

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

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

2000.00

**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 16 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
BIKES PAC

Mailing Address **PO Box 2359**

City **Boulder** State **CO** Zip Code **80306-2359**

FEC ID number of contributing federal political committee. **C C00372862**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2013

Transaction ID : A-C48161

Amount of Each Receipt this Period
3000

B. Full Name (Last, First, Middle Initial)
Boeing Political Action Committe

Mailing Address **1200 Wilson Boulevard**

City **Arlington** State **VA** Zip Code **22209-2300**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2013

Transaction ID : A-C48167

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Brotherhood of Locomotive Engineers

Mailing Address **1370 Ontario Street**

City **Cleveland** State **OH** Zip Code **44113-1744**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2013

Transaction ID : A-C48164

Amount of Each Receipt this Period
1000

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

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

5000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
BUSPAC-American Bus Association

Mailing Address 111 K Street NE

City Washington State DC Zip Code 20002-8105

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 25 / 2013

Transaction ID : A-C48151

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
CH2M Hill Companies, Ltd. PAC

Mailing Address 9191 S Jamaica Street

City Englewood State CO Zip Code 80112-5946

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 08 / 2013

Transaction ID : A-C48219

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
CONPAC

Mailing Address 1000 Wilson Boulevard Suite 3012

City Arlington State VA Zip Code 22209-3927

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 25 / 2013

Transaction ID : A-C48149

Amount of Each Receipt this Period
500

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: (check only one) | PAGE 18 OF 41 |
| | <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)
Citizens for Tom Petri

A. Credit Union Legislative Action Council

Full Name (Last, First, Middle Initial)
Mailing Address 601 Pennsylvania Avenue NW
South Building, Suite 600

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48228

Amount of Each Receipt this Period
1000

B. Federal Express Pac

Full Name (Last, First, Middle Initial)
Mailing Address 942 S Shady Grove Road

City Memphis State TN Zip Code 38120-4117

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2013

Transaction ID : A-C48268

Amount of Each Receipt this Period
1000

C. GAMA PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1400 K Street NW
Suite 801

City Washington State DC Zip Code 20005-2402

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2013

Transaction ID : A-C48271

Amount of Each Receipt this Period
1000

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

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

3000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
General Dynamics Corporation PAC

Mailing Address 2941 Fairview Park Drive
Suite 100

City Falls Church State VA Zip Code 22042-4541

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48275

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
General Electric PAC

Mailing Address 1299 Pennsylvania Avenue NW
Suite 1100

City Washington State DC Zip Code 20004-2414

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48273

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Holland & Knight Committee for Effective Government

Mailing Address 2099 Pennsylvania Avenue NW
Suite 100

City Washington State DC Zip Code 20006-6801

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48227

Amount of Each Receipt this Period
1000

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

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

3000.00

**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 20 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
ICPI Paver PAC

Mailing Address 13921 Park Center Road
Suite 270

City Herndon State VA Zip Code 20171-3269

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48267

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mapps Pac

Mailing Address 1856 Old Reston Avenue
Suite 205

City Reston State VA Zip Code 20190-3330

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A-C48264

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mechanical Contractors Association of America Pac

Mailing Address 1385 Piccard Drive

City Rockville State MD Zip Code 20850-4329

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 25 / 2013

Transaction ID : A-C48154

Amount of Each Receipt this Period
1000

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: (check only one) | PAGE 21 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
NAPUS PAC

Mailing Address 8 Herbert Street

City State Zip Code
Alexandria VA 22305-2628

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 22 / 2013

Transaction ID : A-C48274

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
National Court Reporters Assn. PAC

Mailing Address 8224 Old Courthouse Road

City State Zip Code
Vienna VA 22182-3808

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 15 / 2013

Transaction ID : A-C48145

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
NSTA PAC

Mailing Address 113 S West Street
Suite 400

City State Zip Code
Alexandria VA 22314-2851

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48225

Amount of Each Receipt this Period
1000

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

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

2250.00

**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 22 OF 41 |
| | <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)
Citizens for Tom Petri

A. Owner Operator Independent Drivers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 30th Street NW

City Washington State DC Zip Code 20007-3708

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48230

Amount of Each Receipt this Period
1000

B. Parsons Brinckerhoff Inc. Pac

Full Name (Last, First, Middle Initial)
Mailing Address 1 Penn Plaza

City New York State NY Zip Code 10119-0002

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48233

Amount of Each Receipt this Period
1000

C. Patton Boggs Pac

Full Name (Last, First, Middle Initial)
Mailing Address 2550 M Street NW Suite 500

City Washington State DC Zip Code 20037-1301

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48229

Amount of Each Receipt this Period
1000

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

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

3000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 41 |
| | <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)
Citizens for Tom Petri

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) Raytheon PAC | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2013 |
| Mailing Address 1100 Wilson Boulevard Suite 1500 | | Transaction ID : A-C48165 |
| City Arlington | State VA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2000 | |

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) Raytheon PAC | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2013 |
| Mailing Address 1100 Wilson Boulevard Suite 1500 | | Transaction ID : A-C48166 |
| City Arlington | State VA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2000 | |

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) Republican Main St Pac | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2013 |
| Mailing Address 1220 L Street NW Suite 100-263 | | Transaction ID : A-C48163 |
| City Washington | State DC | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000 | |

| | |
|---|---------|
| 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: (check only one) | PAGE 24 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Rockpac

Mailing Address 1605 King Street

City Alexandria State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48226

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Rockwell Collins Good Government Committee

Mailing Address 1300 Wilson Boulevard Suite 200

City Arlington State VA Zip Code 22209-2307

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2013

Transaction ID : A-C48155

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Taxicab Limousine & Paratransit Assoc PAC

Mailing Address 3849 Farragut Avenue

City Kensington State MD Zip Code 20895-2004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2013

Transaction ID : A-C48272

Amount of Each Receipt this Period
 1000

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: (check only one) | PAGE 25 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 1101 Pennsylvania Avenue NW
Suite 800

City Washington State DC Zip Code 20004-2526

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2013

Transaction ID : A-C48231

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Transportation Intermediaries Association PAC

Mailing Address 1625 Prince Street
Suite 200

City Alexandria State VA Zip Code 22314-2883

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 25 / 2013

Transaction ID : A-C48153

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
United Transportation Union PAC

Mailing Address 24950 Country Club Boulevard
Suite 340

City North Olmsted State OH Zip Code 44070-5333

FEC ID number of contributing federal political committee. **C C00001636**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2013

Transaction ID : A-C48146

Amount of Each Receipt this Period
1000

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

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

3000.00

**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 26 OF 41 |
| | <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)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 Glenlake Parkway

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : A-C48232

Amount of Each Receipt this Period
 1000

B. 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

47250.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 41 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
National Exchange Bank

Mailing Address 130 S Main Street

City State Zip Code
Fond Du Lac WI 54935-4210

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1316.85

Date of Receipt
 / /
02 / 10 / 2013

Transaction ID : A-M48217

Amount of Each Receipt this Period
555.37

Interest

B. 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
 / /

Amount of Each Receipt this Period

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
 / /

Amount of Each Receipt this Period

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

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

555.37

555.37

**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 28 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Carole Goeas & Associates | | Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2013 |
| Mailing Address 1707 Prince Street Apt. 5 | | Amount of Each Disbursement this Period 2500 Transaction ID : B-E-48179 |
| City Alexandria | State VA Zip Code 22314-2804 | |
| Purpose of Disbursement Other: Fundraising retainer | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Carole Goeas & Associates | | Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2013 |
| Mailing Address 1707 Prince Street Apt. 5 | | Amount of Each Disbursement this Period 30 Transaction ID : B-E-48180 |
| City Alexandria | State VA Zip Code 22314-2804 | |
| Purpose of Disbursement Other: Fundraising expenses | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Carole Goeas & Associates | | Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013 |
| Mailing Address 1707 Prince Street Apt. 5 | | Amount of Each Disbursement this Period 2500 Transaction ID : B-E-48182 |
| City Alexandria | State VA Zip Code 22314-2804 | |
| Purpose of Disbursement Other: Fundraising retainer | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5030.00 |
| 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 29 OF 41 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Carole Goeas & Associates | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2013 |
| Mailing Address 1707 Prince Street Apt. 5 | | Amount of Each Disbursement this Period 483.07 Transaction ID : B-E-48188 |
| City Alexandria | State VA Zip Code 22314-2804 | |
| Purpose of Disbursement Other: Fundraising expenses | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Carole Goeas & Associates | | Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2013 |
| Mailing Address 1707 Prince Street Apt. 5 | | Amount of Each Disbursement this Period 2500 Transaction ID : B-E-48196 |
| City Alexandria | State VA Zip Code 22314-2804 | |
| Purpose of Disbursement Other: Fundraising retainer | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Carole Goeas & Associates | | Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2013 |
| Mailing Address 1707 Prince Street Apt. 5 | | Amount of Each Disbursement this Period 1363.06 Transaction ID : B-E-48201 |
| City Alexandria | State VA Zip Code 22314-2804 | |
| Purpose of Disbursement Other: Fundraising expenses | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4346.13 |
| 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 30 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Charter Communications | | Date of Disbursement |
| Mailing Address 5720 Bandel Road NW | | M M / D D / Y Y Y Y 01 / 08 / 2013 |
| City Rochester | State MN | Amount of Each Disbursement this Period |
| Zip Code 55901-2161 | | 244.3 |
| Purpose of Disbursement Other: Phone and internet | Category/Type | Transaction ID : B-E-48168 |
| 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. Charter Communications | | Date of Disbursement |
| Mailing Address 5720 Bandel Road NW | | M M / D D / Y Y Y Y 03 / 03 / 2013 |
| City Rochester | State MN | Amount of Each Disbursement this Period |
| Zip Code 55901-2161 | | 152.01 |
| Purpose of Disbursement Other: Phone and internet | Category/Type | Transaction ID : B-E-48194 |
| 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) c. Charter Communications | | Date of Disbursement |
| Mailing Address 5720 Bandel Road NW | | M M / D D / Y Y Y Y 03 / 19 / 2013 |
| City Rochester | State MN | Amount of Each Disbursement this Period |
| Zip Code 55901-2161 | | 180 |
| Purpose of Disbursement Other: Phone and internet | Category/Type | Transaction ID : B-E-48199 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 576.31 |
| 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 31 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Fond du Lac Rotary | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013 |
| Mailing Address PO Box 182 | | Amount of Each Disbursement this Period 212 Transaction ID : B-E-48170 |
| City Fond Du Lac | State WI | |
| Purpose of Disbursement Other: Dues | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Fond du Lac Rotary | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address PO Box 182 | | Amount of Each Disbursement this Period 247 Transaction ID : B-E-48177 |
| City Fond Du Lac | State WI | |
| Purpose of Disbursement Other: Dues | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. HBA of Fond du lac | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address 490 W Rolling Meadows Drive | | Amount of Each Disbursement this Period 1130 Transaction ID : B-E-48178 |
| City Fond Du Lac | State WI | |
| Purpose of Disbursement Other: Rent | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1589.00 |
| 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 32 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. HBA of Fond du lac | | Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013 |
| Mailing Address 490 W Rolling Meadows Drive | | Amount of Each Disbursement this Period 1130 Transaction ID : B-E-48183 |
| City Fond Du Lac | State WI | |
| Zip Code 54937-8609 | Purpose of Disbursement Other: Rent | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. HBA of Fond du lac | | Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2013 |
| Mailing Address 490 W Rolling Meadows Drive | | Amount of Each Disbursement this Period 1130 Transaction ID : B-E-48193 |
| City Fond Du Lac | State WI | |
| Zip Code 54937-8609 | Purpose of Disbursement Other: Rent | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. HBA of Fond du lac | | Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2013 |
| Mailing Address 490 W Rolling Meadows Drive | | Amount of Each Disbursement this Period 1130 Transaction ID : B-E-48249 |
| City Fond Du Lac | State WI | |
| Zip Code 54937-8609 | Purpose of Disbursement Other: Rent | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3390.00 |
| 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 33 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Hoerth Storage | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013 |
| Mailing Address 74 Halbach Court | | Amount of Each Disbursement this Period 1272 Transaction ID : B-E-48171 |
| City Fond Du Lac | State WI | |
| Purpose of Disbursement Other: Storage fee | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Internal Revenue Service | | Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013 |
| Mailing Address PO Box 804522 | | Amount of Each Disbursement this Period 429.06 Transaction ID : B-E-48206 |
| City Cincinnati | State OH | |
| Purpose of Disbursement Other: Payroll tax | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: _____ | District: _____ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Internal Revenue Service | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address PO Box 804522 | | Amount of Each Disbursement this Period 82.75 Transaction ID : B-E-48208 |
| City Cincinnati | State OH | |
| Purpose of Disbursement Other: payroll tax | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: _____ | District: _____ | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1783.81 |
| 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 34 OF 41 | | |
| | <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)
Citizens for Tom Petri

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Internal Revenue Service | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address PO Box 804522 | | Amount of Each Disbursement this Period 216.5 Transaction ID : B-E-48209 |
| City Cincinnati State OH Zip Code 45280-4522 | Purpose of Disbursement Other: payroll tax | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Internal Revenue Service | | Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2013 |
| Mailing Address PO Box 804522 | | Amount of Each Disbursement this Period 324.93 Transaction ID : B-E-48189 |
| City Cincinnati State OH Zip Code 45280-4522 | Purpose of Disbursement Other: Tax | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Internal Revenue Service | | Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2013 |
| Mailing Address PO Box 804522 | | Amount of Each Disbursement this Period 429.05 Transaction ID : B-E-48214 |
| City Cincinnati State OH Zip Code 45280-4522 | Purpose of Disbursement Other: Payroll tax | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 970.48 |
| 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 35 OF 41 | | |
| | <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)
Citizens for Tom Petri

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Internal Revenue Service | | Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2013 |
| Mailing Address PO Box 804522 | | Amount of Each Disbursement this Period 502.53 Transaction ID : B-E-48236 |
| City Cincinnati State OH Zip Code 45280-4522 | Purpose of Disbursement Other: Payroll tax | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Sadie Vander Velde | | Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013 |
| Mailing Address 6456 Bonnie View Road | | Amount of Each Disbursement this Period 1460.61 Transaction ID : B-E-48210 |
| City Pickett State WI Zip Code 54964-9505 | Purpose of Disbursement Administrative/Salary/Overhead: Wages | |
| Candidate Name | Category/Type 001 | |
| 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) C. Sadie Vander Velde | | Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013 |
| Mailing Address 6456 Bonnie View Road | | Amount of Each Disbursement this Period 1498.76 Transaction ID : B-E-48215 |
| City Pickett State WI Zip Code 54964-9505 | Purpose of Disbursement Administrative/Salary/Overhead: Wages | |
| Candidate Name | Category/Type 001 | |
| 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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3461.90 |
| 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 36 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Sadie Vander Velde | | Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2013 |
| Mailing Address 6456 Bonnie View Road | | Amount of Each Disbursement this Period 1498.74 |
| City Pickett State WI Zip Code 54964-9505 | Purpose of Disbursement Administrative/Salary/Overhead: Wages Candidate Name Category/Type 001 | |
| 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 : B-E-48238 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. The Mail Haus | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013 |
| Mailing Address 1745 Suburban Drive | | Amount of Each Disbursement this Period 3695.12 |
| City De Pere State WI Zip Code 54115-1850 | Purpose of Disbursement Other: Christmas card mailing Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | Transaction ID : B-E-48169 |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. USBank | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013 |
| Mailing Address 55 S Main Street | | Amount of Each Disbursement this Period 21.17 |
| City Fond Du Lac State WI Zip Code 54935-4232 | Purpose of Disbursement Other: Credit card payment Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | Transaction ID : B-E-48174 |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5215.03 |
| 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 37 OF 41 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. USBank | | Date of Disbursement MM / DD / YYYY 02 / 17 / 2013 |
| Mailing Address 55 S Main Street | | Amount of Each Disbursement this Period 1262.61 |
| City Fond Du Lac | State WI | |
| Zip Code 54935-4232 | Purpose of Disbursement Other: Credit card payment | Original vendors exceeding reporting threshold itemized as memo transactions. |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Aristotle | | Date of Disbursement MM / DD / YYYY 01 / 01 / 2013 |
| Mailing Address 205 Pennsylvania Avenue SE Upper | | Amount of Each Disbursement this Period 700 |
| City Washington | State DC | |
| Zip Code 20003-1182 | Purpose of Disbursement Back Office software | [MEMO ITEM] Subitemization of USBank(02/17/13) |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Holiday Inn-Manitowoc | | Date of Disbursement MM / DD / YYYY 01 / 17 / 2013 |
| Mailing Address Interstate 43 & U.s. 151 | | Amount of Each Disbursement this Period 537.41 |
| City Manitowoc | State WI | |
| Zip Code 54220 | Purpose of Disbursement Food expense | [MEMO ITEM] Subitemization of USBank(02/17/13) |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1262.61 |
| 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 38 OF 41 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

| | | | | | | | | | | | | |
|--|--|--|---------|---------|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) A. USBank | | Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>19</td> <td></td> <td>2013</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 03 | | 19 | | 2013 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 03 | | 19 | | 2013 | | | | | | | | |
| Mailing Address 55 S Main Street | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>1330.71</td> </tr> </table> | 1330.71 | | | | | | | | | |
| 1330.71 | | | | | | | | | | | | |
| City State Zip Code Fond Du Lac WI 54935-4232 | Transaction ID : B-E-48198 Original vendors exceeding reporting threshold itemized as memo transactions. | | | | | | | | | | | |
| Purpose of Disbursement Other: Credit card payment | | | | | | | | | | | | |
| Candidate Name | Category/Type | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|--|--|-----|---------|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) B. Aristotle | | Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>01</td> <td></td> <td>2013</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 02 | | 01 | | 2013 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 02 | | 01 | | 2013 | | | | | | | | |
| Mailing Address 205 Pennsylvania Avenue SE Upper | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>700</td> </tr> </table> | 700 | | | | | | | | | |
| 700 | | | | | | | | | | | | |
| City State Zip Code Washington DC 20003-1182 | Transaction ID : B-S-155 [MEMO ITEM] Subitemization of USBank(03/19/13) | | | | | | | | | | | |
| Purpose of Disbursement Back office software | | | | | | | | | | | | |
| Candidate Name | Category/Type | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|--|--|--------|---------|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) c. Schneider's of Capitol Hill | | Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>25</td> <td></td> <td>2013</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 02 | | 25 | | 2013 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 02 | | 25 | | 2013 | | | | | | | | |
| Mailing Address 300 Massachusetts Avenue NE | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>210.71</td> </tr> </table> | 210.71 | | | | | | | | | |
| 210.71 | | | | | | | | | | | | |
| City State Zip Code Washington DC 20002-5702 | Transaction ID : B-S-159 [MEMO ITEM] Subitemization of USBank(03/19/13) | | | | | | | | | | | |
| Purpose of Disbursement Beverages | | | | | | | | | | | | |
| Candidate Name | Category/Type | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | |

| | | |
|---|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | <table border="1"> <tr> <td>1330.71</td> </tr> </table> | 1330.71 |
| 1330.71 | | |
| TOTAL This Period (last page this line number only)..... | <table border="1"> <tr> <td></td> </tr> </table> | |
| | | |

**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 39 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. AirTran Airways | | Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013 |
| Mailing Address 9955 Airtran Boulevard | | Amount of Each Disbursement this Period 292.8 |
| City Orlando | State FL | |
| Zip Code 32827-5330 | Purpose of Disbursement Airfare | Transaction ID : B-S-161 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] Subitemization of USBank(03/19/13) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. WI Dept. of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013 |
| Mailing Address PO Box 8903 | | Amount of Each Disbursement this Period 89.75 |
| City Madison | State WI | |
| Zip Code 53708-8903 | Purpose of Disbursement Other: Payroll tax | Transaction ID : B-E-48205 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. WI Dept. of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013 |
| Mailing Address PO Box 8903 | | Amount of Each Disbursement this Period 12.46 |
| City Madison | State WI | |
| Zip Code 53708-8903 | Purpose of Disbursement Other: payroll tax | Transaction ID : B-E-48207 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 102.21 |
| 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 40 OF 41 | | | |
| | <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)
Citizens for Tom Petri

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. WI Dept. of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013 |
| Mailing Address PO Box 8903 | | Amount of Each Disbursement this Period 89.75 |
| City Madison | State WI | |
| Zip Code 53708-8903 | Purpose of Disbursement Other: payroll tax | Transaction ID : B-E-48213 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. WI Dept. of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2013 |
| Mailing Address PO Box 8903 | | Amount of Each Disbursement this Period 89.75 |
| City Madison | State WI | |
| Zip Code 53708-8903 | Purpose of Disbursement Other: Payroll tax | Transaction ID : B-E-48235 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 179.50 |
| TOTAL This Period (last page this line number only)..... | 29237.69 |

**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 41 OF 41 |
| | <input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. NRCC | | Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2013 |
| Mailing Address 320 1st Street SE | | Amount of Each Disbursement this Period 41996 Transaction ID : B-E-48176 |
| City Washington | State DC | |
| Zip Code 20003-1838 | Purpose of Disbursement Transfer of excess funds | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 41996.00 |
| TOTAL This Period (last page this line number only)..... | 41996.00 |