

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
WISCONSIN NEXT PAC

ADDRESS (number and street) **PO BOX 620661**
 Check if different than previously reported. (ACC) **MIDDLETON WI 53562**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00656728 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2018 through / / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
LIND, KATE, , ,
Type or Print Name of Treasurer

Signature of Treasurer LIND, KATE, , , [Electronically Filed] Date / / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WISCONSIN NEXT PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value=""/>	<input type="text" value="1044000.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="812841.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="545050.00"/>	<input type="text" value="840050.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1357891.87"/>	<input type="text" value="1884050.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1247219.49"/>	<input type="text" value="1773377.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="110672.38"/>	<input type="text" value="110672.38"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

WISCONSIN NEXT PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	545000.00	840000.00
(ii) Unitemized	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	545050.00	840050.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	545050.00	840050.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	545050.00	840050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	545050.00	840050.00

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	128852.18	336182.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	128852.18	336182.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1118367.31	1437195.59
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1247219.49	1773377.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1247219.49	1773377.62

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	545050.00	840050.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	545050.00	840050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	128852.18	336182.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	128852.18	336182.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

A. FLECKENSTEIN, ANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N87W27165 PERENNIAL TERRACE

City HARTLAND	State WI	Zip Code 53029
------------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2018

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. FLECKENSTEIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W260 N2914 STEEPLECHASE DR

City PEWAUKEE	State WI	Zip Code 53072
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) SYSTEMS ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2018

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. METROPOLITAN MILWAUKEE ASSOC OF COMMERCE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 756 N MILWAUKEE ST

City MILWAUKEE	State WI	Zip Code 53202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2018

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	535000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

A. NASGOVITZ, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4470 N LAKE DRIVE
 City SHOREWOOD State WI Zip Code 53211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEARTLAND ADVISORS Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2018
Transaction ID : SA11AI.4242
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. STANDARD PROCESS INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 W ROYAL LEE DR
 City PALMYRA State WI Zip Code 53156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.4244
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	545000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

Full Name (Last, First, Middle Initial) A. ADVANTAGE DIRECT		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 2300 CLARENDON BLVD #303		FEC Identification Number C Transaction ID : SB21B.4271 Amount of Each Disbursement this Period 1145.81
City ARLINGTON	State VA	
Purpose of Disbursement TELEPHONE SERVICES	Zip Code 22201	Memo Item <input type="checkbox"/>
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. ARENA COMMUNICATIONS		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 1780 SEQUOIA VISTA CIRCLE		FEC Identification Number C Transaction ID : SB21B.4267 Amount of Each Disbursement this Period 1938.00
City SALT LAKE CITY	State UT	
Purpose of Disbursement COLLATERAL	Zip Code 84104	Memo Item <input type="checkbox"/>
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. ASHBY LAW OFFICE		Date of Disbursement MM / DD / YYYY 04 / 06 / 2018
Mailing Address 602 CAMERON STREET #102		FEC Identification Number C Transaction ID : SB21B.4256 Amount of Each Disbursement this Period 3500.00
City ALEXANDRIA	State VA	
Purpose of Disbursement LEGAL SERVICES	Zip Code 22314	Memo Item <input type="checkbox"/>
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).....▶	6583.81
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

Full Name (Last, First, Middle Initial) A. ASPECT CONSULTING LLC		Date of Disbursement MM / DD / YYYY 04 / 06 / 2018
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4255 Amount of Each Disbursement this Period [REDACTED] 1512.69
City MADISON	State WI	Zip Code 53717
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ASPECT CONSULTING LLC		Date of Disbursement MM / DD / YYYY 05 / 11 / 2018
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4265 Amount of Each Disbursement this Period [REDACTED] 1502.35
City MADISON	State WI	Zip Code 53717
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING LLC		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4276 Amount of Each Disbursement this Period [REDACTED] 1500.00
City MADISON	State WI	Zip Code 53717
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 4515.04

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

Full Name (Last, First, Middle Initial) A. BATTLEGROUNDS STRATEGIES INC		Date of Disbursement MM / DD / YYYY 04 / 13 / 2018
Mailing Address 1275 NIAGRA ROAD		FEC Identification Number C [] Transaction ID : SB21B.4260 Amount of Each Disbursement this Period [] 7000.00
City OCONOMOWOC	State WI	Zip Code 53066
Purpose of Disbursement STRATEGY CONSULTING		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BATTLEGROUNDS STRATEGIES INC		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018
Mailing Address 1275 NIAGRA ROAD		FEC Identification Number C [] Transaction ID : SB21B.4270 Amount of Each Disbursement this Period [] 7000.00
City OCONOMOWOC	State WI	Zip Code 53066
Purpose of Disbursement STRATEGY CONSULTING		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COYLE CONSULTING SERVICES LLC		Date of Disbursement MM / DD / YYYY 04 / 06 / 2018
Mailing Address 3494 SABAKA TRAIL		FEC Identification Number C [] Transaction ID : SB21B.4258 Amount of Each Disbursement this Period [] 5000.00
City VERONA	State WI	Zip Code 53593
Purpose of Disbursement FUNDRAISING CONSULTING		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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 19000.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

Full Name (Last, First, Middle Initial)
A. COYLE CONSULTING SERVICES LLC

Date of Disbursement: / /

Mailing Address 3494 SABAKA TRAIL

City VERONA State WI Zip Code 53593

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number:
Transaction ID : **SB21B.4266**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. COYLE CONSULTING SERVICES LLC

Date of Disbursement: / /

Mailing Address 3494 SABAKA TRAIL

City VERONA State WI Zip Code 53593

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number:
Transaction ID : **SB21B.4275**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. FIREHOUSE STRATEGIES LLC

Date of Disbursement: / /

Mailing Address 1212 NEW YORK AVE NW #550

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number:
Transaction ID : **SB21B.4257**
Amount of Each Disbursement this Period:
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

Full Name (Last, First, Middle Initial) A. KATAHDIN STRATEGIES		Date of Disbursement MM / DD / YYYY 04 / 13 / 2018	
Mailing Address 886 BURKETTVILLE RD		FEC Identification Number C [] Transaction ID : SB21B.4261 Amount of Each Disbursement this Period [] 4000.00	
City APPLETON	State ME	Zip Code 04862	Category/ Type []
Purpose of Disbursement STRATEGY CONSULTING		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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. KATAHDIN STRATEGIES		Date of Disbursement MM / DD / YYYY 05 / 22 / 2018	
Mailing Address 886 BURKETTVILLE RD		FEC Identification Number C [] Transaction ID : SB21B.4268 Amount of Each Disbursement this Period [] 4000.00	
City APPLETON	State ME	Zip Code 04862	Category/ Type []
Purpose of Disbursement STRATEGY CONSULTING		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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. MKJ INC.		Date of Disbursement MM / DD / YYYY 04 / 04 / 2018	
Mailing Address 5905 GLOSTER ROAD		FEC Identification Number C [] Transaction ID : SB21B.4259 Amount of Each Disbursement this Period [] 10000.00	
City BETHESDA	State MD	Zip Code 20816	Category/ Type []
Purpose of Disbursement FUNDRAISING CONSULTING		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:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 18000.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

Full Name (Last, First, Middle Initial)

A. MKJ INC.

Mailing Address 5905 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4264
Amount of Each Disbursement this Period
10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETPOINT CONSULTING INC.

Mailing Address 66 CANAL CENTER PLAZA #555

City ALEXANDRIA State VA Zip Code 22201

Purpose of Disbursement
DATA SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4262
Amount of Each Disbursement this Period
4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETPOINT CONSULTING INC.

Mailing Address 66 CANAL CENTER PLAZA #555

City ALEXANDRIA State VA Zip Code 22201

Purpose of Disbursement
DATA SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4269
Amount of Each Disbursement this Period
5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

19000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC

A. TARGETPOINT CONSULTING INC.

Full Name (Last, First, Middle Initial)

Mailing Address 66 CANAL CENTER PLAZA #555

City ALEXANDRIA State VA Zip Code 22201

Purpose of Disbursement DATA SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4273

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. THE TARRANCE GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 201 N UNION ST #410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement POLLING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4263

Amount of Each Disbursement this Period: 18188.00

Memo Item

C. THE TARRANCE GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 201 N UNION ST #410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement POLLING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4274

Amount of Each Disbursement this Period: 20700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	43888.00
TOTAL This Period (last page this line number only).....▶	128762.18

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC
FEC IDENTIFICATION NUMBER
C C00656728

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee ARENA COMMUNICATIONS
Mailing Address 1780 SEQUOIA VISTA CIRCLE
City SALT LAKE CITY State UT Zip Code 84104
Purpose of Expenditure DIRECT MAIL Category/Type 001
Date of Public Distribution/Dissemination 04/17/2018
Amount 12887.00
Transaction ID : SE.4212
Date of Disbursement or Obligation 04/17/2018
Name of Federal Candidate: VUKMIR, LEAH, , ,
Support Oppose Office Sought: House District: 00
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 919286.43
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ARENA COMMUNICATIONS
Mailing Address 1780 SEQUOIA VISTA CIRCLE
City SALT LAKE CITY State UT Zip Code 84104
Purpose of Expenditure DIRECT MAIL Category/Type 004
Date of Public Distribution/Dissemination 04/20/2018
Amount 12887.00
Transaction ID : SE.4217
Date of Disbursement or Obligation 04/19/2018
Name of Federal Candidate: VUKMIR, LEAH, , ,
Support Oppose Office Sought: House District: 00
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 932173.43
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 25774.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

LIND, KATE, , ,

[Electronically Filed]

Date 07/14/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WISCONSIN NEXT PAC	FEC IDENTIFICATION NUMBER ▼ C C00656728
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item BATTLEGROUND STRATEGIES INC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1275 NIAGRA ROAD			Amount <input type="text"/>		
City OCONOMOWOC	State WI	Zip Code 53066	Transaction ID : SE.4226		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: VUKMIR, LEAH, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item DMM MEDIA			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1911 N FORT MYER DR SUITE 400			Amount <input type="text"/>		
City ARLINGTON	State VA	Zip Code 22209	Transaction ID : SE.4169		
Purpose of Expenditure TV AD PRODUCTION		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: VUKMIR, LEAH, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

LIND, KATE, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WISCONSIN NEXT PAC	FEC IDENTIFICATION NUMBER ▼ C C00656728
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee DMM MEDIA <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1911 N FORT MYER DR SUITE 400	Amount <input type="text"/> 11242.31
City ARLINGTON State VA Zip Code 22209	
Purpose of Expenditure TV AD PRODUCTION	Transaction ID : SE.4229
Name of Federal Candidate: VUKMIR, LEAH, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1431160.74	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>WI</u>	

Full Name of Payee DMM MEDIA <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1911 N FORT MYER DR SUITE 400	Amount <input type="text"/> 3141.07
City ARLINGTON State VA Zip Code 22209	
Purpose of Expenditure RADIO AD PRODUCTION	Transaction ID : SE.4230
Name of Federal Candidate: VUKMIR, LEAH, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1434301.81	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>WI</u>	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 14383.38
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

LIND, KATE, , , [Electronically Filed] Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC
FEC IDENTIFICATION NUMBER
C C00656728

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee SRCP MEDIA
Mailing Address 201 NORTH UNION ST SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure TV ADS Category/Type 004
Name of Federal Candidate: VUKMIR, LEAH, , ,
Calendar Year-To-Date Per Election for Office Sought 891546.50
Disbursement For: Primary

Full Name of Payee SRCP MEDIA
Mailing Address 201 NORTH UNION ST SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure TV AD Category/Type 004
Name of Federal Candidate: VUKMIR, LEAH, , ,
Calendar Year-To-Date Per Election for Office Sought 1349193.43
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 972632.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

LIND, KATE, , ,

[Electronically Filed]

Date 07 / 14 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
WISCONSIN NEXT PAC
FEC IDENTIFICATION NUMBER
C C00656728

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee SRCP MEDIA
Mailing Address 201 NORTH UNION ST SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure RADIO AD Category/Type 004
Date of Public Distribution/Dissemination 05/17/2018
Amount 70725.00
Transaction ID : SE.4232
Date of Disbursement or Obligation 05/15/2018
Name of Federal Candidate: VUKMIR, LEAH, , ,
Support Oppose Office Sought: House District: 00
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1419918.43
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Name of Federal Candidate:
Support Oppose Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 70725.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 1118367.31

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

LIND, KATE, , ,

[Electronically Filed]

Date 07/14/2018

Signature