

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

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| D | D |
| 3 | 1 |

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| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 6 | | 60598.82 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 328287.28 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 286723.97 | 1518864.91 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 615011.25 | 1579463.73 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 170029.46 | 1134481.94 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 444981.79 | 444981.79 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 85662.55 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 0 | 1 |

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| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

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| M | M |
| 0 | 8 |

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| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 85954.18 | 315989.18 |
| (i) Itemized (use Schedule A) | 69947.74 | 648082.72 |
| (ii) Unitemized | 155901.92 | 964071.90 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 1000.00 | 1000.00 |
| (b) Political Party Committees | 12000.00 | 77900.00 |
| (c) Other Political Committees (such as PACs) | 168901.92 | 1042971.90 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 12. Transfers From Affiliated/Other Party Committees | 117000.00 | 458598.77 |
| 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) | 822.05 | 12742.54 |
| 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 | 4551.70 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 4551.70 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 286723.97 | 1518864.91 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 286723.97 | 1514313.21 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 1498.71 | 24605.85 |
| (ii) Non-Federal Share..... | 5637.94 | 92628.06 |
| (b) Other Federal Operating Expenditures..... | 85903.15 | 462881.12 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 93039.80 | 580115.03 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 2855.88 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 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 | 245.00 |
| (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 | 245.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 76989.66 | 551266.03 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 76989.66 | 551266.03 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 170029.46 | 1134481.94 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 164391.52 | 1041853.88 |

DETAILED SUMMARY PAGE
of Disbursements

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 168901.92 | 1042971.90 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 245.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 168901.92 | 1042726.90 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 87401.86 | 487486.97 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 822.05 | 12742.54 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 86579.81 | 474744.43 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|-------------------------------------|--|---|
| Full Name (Last, First, Middle Initial) A. James Barrett | | Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2006 | |
| Mailing Address N51 W35427 River Road | | Transaction ID: SA11A1.24910 | |
| City Oconomowoc | State WI | Zip Code 53066 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested | Occupation Information Requested | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. James Barry, III | | Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006 | |
| Mailing Address 1121 N Edison Street | | Transaction ID: SA11A1.24913 | |
| City Milwaukee | State WI | Zip Code 53202 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer James T. Barry Co., Inc | Occupation Real Estate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. James Becker | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address 5830 N Sunny Point Rd | | Transaction ID: SA11A1.24914 | |
| City Milwaukee | State WI | Zip Code 53209 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Self | Occupation Private Investor | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 | | |

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| SUBTOTAL of Receipts This Page (optional) ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
J. Borden

Mailing Address PO Box 591

City State Zip Code
Janesville WI 53545

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

Name of Employer Occupation
HUF COR, Inc President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: SA11A1.24915

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Cindy Broydrick

Mailing Address 111 E Kilbourn Ste 2060

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2006

Transaction ID: SA11A1.24916

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address P.O. Box 466

City State Zip Code
Waukesha WI 53187

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

Name of Employer Occupation
Century Fence Company President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: SA11A1.24918

Amount of Each Receipt this Period
500.00

Contribution

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Barbara Carlson | | Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006 | |
| Mailing Address PO Box 477 | | Transaction ID: SA11A1.24921 | |
| City Iron River | State WI | Zip Code 54847 | Amount of Each Receipt this Period 10000.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Aggregate Year-to-Date ▼ 10000.00 | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Julie Cayce | | Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006 | |
| Mailing Address 832 S. Madison St. | | Transaction ID: SA11A1.24923 | |
| City Green Bay | State WI | Zip Code 54301 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested General Manager Aggregate Year-to-Date ▼ 2550.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Dennis Cox | | Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2006 | |
| Mailing Address 4488 N Oakland | | Transaction ID: SA11A1.24927 | |
| City Milwaukee | State WI | Zip Code 53211 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Aggregate Year-to-Date ▼ 250.00 | | |

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| SUBTOTAL of Receipts This Page (optional) ▶ | 10300.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Walter Dauska | | Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006 | |
| Mailing Address 378 Shady Drive | | Transaction ID: SA11A1.24929 | |
| City State Zip Code Oneida WI 54155 | Amount of Each Receipt this Period 100.00 | | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Green Bay Packaging | Occupation Accountant | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. David Davies | | Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006 | |
| Mailing Address 700 Waters Edge Rd | | Transaction ID: SA11A1.24930 | |
| City State Zip Code Racine WI 53402 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer D W Davies Co | Occupation Chairman | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1050.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. Forest County Potawatomi Community | | Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2006 | |
| Mailing Address PO 340 | | Transaction ID: SA11A1.25075 | |
| City State Zip Code Crandon WI 54520 | Amount of Each Receipt this Period 5000.00 | | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5600.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Forest County Potawatomi Community

Mailing Address PO 340

City Crandon State WI Zip Code 54520

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2006

Transaction ID: SA11A1.25076

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
James French

Mailing Address 1515 Ridge Rd

City Sheboygan State WI Zip Code 53081

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

Name of Employer Occupation
J.L. French Corp. President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2006

Transaction ID: SA11A1.24941

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address 10556 N Port Washington Road

City Mequon State WI Zip Code 53092

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

Name of Employer Occupation
Northwestern Mutual Life Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2006

Transaction ID: SA11A1.24943

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **5750.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Fran Frigo | | Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006 | |
| Mailing Address 1245 Outward Ave | | Transaction ID: SA11A1.24944 | |
| City State Zip Code De Pere WI 54115 | | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Occupation Information Requested Aggregate Year-to-Date ▼ 250.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. David Haskell | | Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006 | |
| Mailing Address 1255 Lakeside Drive | | Transaction ID: SA11A1.24950 | |
| City State Zip Code Elm Grove WI 53122 | | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Occupation Surgeon Aggregate Year-to-Date ▼ 1000.00 | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Thomas Hayssen | | Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2006 | |
| Mailing Address 1111 E Bywater Lane | | Transaction ID: SA11A1.24951 | |
| City State Zip Code Milwaukee WI 53217-2839 | | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Racine Iron & Wire Works Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Occupation Director Mfg Aggregate Year-to-Date ▼ 250.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1300.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|-------------|--|---|
| Full Name (Last, First, Middle Initial) A. Joyce Heinrich | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address 1035 Hill St #224 | | Transaction ID: SA11A1.25249 | |
| City Watertown | State WI | Zip Code 53094 | Amount of Each Receipt this Period 75.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested | Occupation | Aggregate Year-to-Date ▼ 1600.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Nancy Hernandez | | Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2006 | |
| Mailing Address W Wells St. #4A | | Transaction ID: SA11A1.24953 | |
| City Milwaukee | State WI | Zip Code 53203 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested | Occupation Information Requested | Aggregate Year-to-Date ▼ 250.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Roger Hoffman | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address 1612 S Golf Glen Unit F | | Transaction ID: SA11A1.24954 | |
| City Madison | State WI | Zip Code 53704 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Self | Occupation Investor | Aggregate Year-to-Date ▼ 750.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 825.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Charles Hyde

Mailing Address 1234 Washington Ave.

City State Zip Code
Oshkosh WI 54901

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2006

Transaction ID: SA11A1.24957

Amount of Each Receipt this Period
60.00

Contribution

B. Full Name (Last, First, Middle Initial)
David Kachel

Mailing Address 513 W Center St

City State Zip Code
Whitewater WI 53190

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

Name of Employer Self Occupation Businessman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2006

Transaction ID: SA11A1.24964

Amount of Each Receipt this Period
200.00

Contribution

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

Mailing Address 1751 Scenic Rd

City State Zip Code
Richfield WI 53076

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

Name of Employer Retired Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 332.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2006

Transaction ID: SA11A1.24966

Amount of Each Receipt this Period
166.00

Contribution

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 426.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|-------------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) Mary Kohler | | Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006 | |
| Mailing Address PO Box 897 | | Transaction ID: SA11A1.24967 | |
| City Sheboygan | State WI | Amount of Each Receipt this Period 2500.00 | |
| Zip Code 53082 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Windway Capitol Corp | Occupation Public Relations | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | | |

| | | | |
|---|-------------------------------------|--|--|
| B. Full Name (Last, First, Middle Initial) Terry Kohler | | Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006 | |
| Mailing Address 630 Riverfront Drive | | Transaction ID: SA11A1.24968 | |
| City Sheboygan | State WI | Amount of Each Receipt this Period 2500.00 | |
| Zip Code 53082 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Windway Capital Corp | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | | |

| | | | |
|---|-------------------------------------|--|--|
| C. Full Name (Last, First, Middle Initial) Louis Krikelas | | Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006 | |
| Mailing Address Information Requested | | Transaction ID: SA11A1.24971 | |
| City Dodgeville | State WI | Amount of Each Receipt this Period 200.00 | |
| Zip Code 53533 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Information Requested | Occupation Information Requested | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5200.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
George Kummeth

Mailing Address 4324 Knuell Street

City State Zip Code
Manitowoc WI 54220

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

Name of Employer Occupation
Universal Wire & Stamping President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2006

Transaction ID: SA11A1.24975

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Helen Loewi

Mailing Address 9621 North Lake Drive

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
Milwaukee Resistor President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2006

Transaction ID: SA11A1.24976

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address 777 N Prospect

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Super Steel Products Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2006

Transaction ID: SA11A1.24978

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Allan Lund | | Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2006 | |
| Mailing Address 15025 W Beckwith Rd | | Transaction ID: SA11A1.24979 | |
| City State Zip Code Hayward WI 54843 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer retired | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) B. Donald Lynch | | Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006 | |
| Mailing Address 1230 E Courtland Pl. | | Transaction ID: SA11A1.24980 | |
| City State Zip Code Milwaukee WI 53211 | Amount of Each Receipt this Period 2000.00 | | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer N/A | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. John MacDonough | | Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006 | |
| Mailing Address 6208 Brumder Drive | | Transaction ID: SA11A1.24982 | |
| City State Zip Code Hartland WI 53029 | Amount of Each Receipt this Period 2500.00 | | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Retired | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5500.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. John MacDonough | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address 6208 Brumder Drive | | Transaction ID: SA11A1.25250 | |
| City Hartland | State WI | Amount of Each Receipt this Period 2500.00 | |
| Zip Code 53029 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2500.00 | |
| Name of Employer Retired | Occupation | Contribution | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | Contribution | |

| | | | |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Kathy MacDonough | | Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006 | |
| Mailing Address 6208 N Brumder Rd | | Transaction ID: SA11A1.24983 | |
| City Hartland | State WI | Amount of Each Receipt this Period 2500.00 | |
| Zip Code 53029 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2500.00 | |
| Name of Employer Information Requested | Occupation Information Requested | Contribution | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | Contribution | |

| | | | |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Kathy MacDonough | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address 6208 N Brumder Rd | | Transaction ID: SA11A1.25251 | |
| City Hartland | State WI | Amount of Each Receipt this Period 2500.00 | |
| Zip Code 53029 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2500.00 | |
| Name of Employer Information Requested | Occupation Information Requested | Contribution | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | Contribution | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 7500.00 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|--|--|
| A. Full Name (Last, First, Middle Initial) Louis Maier | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address 9862 N Range Line Rd | | Transaction ID: SA11A1.25252 | |
| City State Zip Code Mequon WI 53092 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested Occupation Information Requested | | Aggregate Year-to-Date ▼ 500.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--|--|
| B. Full Name (Last, First, Middle Initial) James McDonald | | Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006 | |
| Mailing Address 4831 Linderman Ave. | | Transaction ID: SA11A1.24985 | |
| City State Zip Code Racine WI 53406 | | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer retired Occupation retired | | Aggregate Year-to-Date ▼ 400.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--|--|
| C. Full Name (Last, First, Middle Initial) Lawrence Moon | | Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006 | |
| Mailing Address 9850 N Courtland Dr | | Transaction ID: SA11A1.24990 | |
| City State Zip Code Meequon WI 53092 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Lakeside Manufacturing Occupation Mfg Manager | | Aggregate Year-to-Date ▼ 500.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Detlef Moore | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6 |
| Mailing Address 3704 N Lake Dr | | Transaction ID: SA11A1.24991 |
| City State Zip Code Milwaukee WI 53211 | Amount of Each Receipt this Period 225.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Badger Bluegrass Co, Inc | Occupation Self | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 475.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Detlef Moore | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6 |
| Mailing Address 3704 N Lake Dr | | Transaction ID: SA11A1.24992 |
| City State Zip Code Milwaukee WI 53211 | Amount of Each Receipt this Period 150.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Badger Bluegrass Co, Inc | Occupation Self | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 625.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Patrick Murphy | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 1525 Rustic Way | | Transaction ID: SA11A1.24994 |
| City State Zip Code Green Bay WI 54313 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Self Employed | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1375.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Rita Nyffeler | | Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006 | |
| Mailing Address N8305 Weber Road | | Transaction ID: SA11A1.24995 | |
| City East Troy | State WI | Zip Code 53120-2442 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer N/A | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. John Ogden | | Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006 | |
| Mailing Address 1840 N Prospect Ave Apt 211 | | Transaction ID: SA11A1.24998 | |
| City Milwaukee | State WI | Zip Code 53202 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Ogden & Co. Inc | Occupation Realtor | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. John Ogden | | Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006 | |
| Mailing Address 1840 N Prospect Ave Apt 211 | | Transaction ID: SA11A1.25064 | |
| City Milwaukee | State WI | Zip Code 53202 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Ogden & Co. Inc | Occupation Realtor | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 600.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Wayne Oldenburg

Mailing Address 1717 W Civic Dr

City State Zip Code
Milwaukee WI 53209

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

Name of Employer Oldenburg Group, Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: SA11A1.24999

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address PO Box 365

City State Zip Code
Oneida WI 54155

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2006

Transaction ID: SA11A1.25221

Amount of Each Receipt this Period
2000.00

Contribution

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

Mailing Address W6375 Firelane 8

City State Zip Code
Menasha WI 54952

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

Name of Employer Radiology Assn of Appleton Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2006

Transaction ID: SA11A1.25065

Amount of Each Receipt this Period
50.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 2550.00

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
William Perez

Mailing Address 1975 SW Montgomery Dr

City Portland State OR Zip Code 97201

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

Name of Employer SC Johnson Wax Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.25006

Amount of Each Receipt this Period
10000.00

Contribution

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

Mailing Address 2821 N Polzin Rd

City Janesville State WI Zip Code 53548

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.25007

Amount of Each Receipt this Period
100.00

Contribution

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

Mailing Address W304 N2362C N Westwind Dr #3C

City Pewaukee State WI Zip Code 53072

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

Name of Employer The Equitable Bank Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.25010

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **10200.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Debbie Rennes | | Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006 |
| Mailing Address N3522 Riverbend Dr. | | Transaction ID: SA11A1.25013 |
| City State Zip Code Peshtigo WI 54157 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Information Requested Occupation Information Requested | Aggregate Year-to-Date ▼ 2000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Tim Rennes | | Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006 |
| Mailing Address N3522 River Bend Rd | | Transaction ID: SA11A1.25015 |
| City State Zip Code Peshtigo WI 54157 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Rennes Health Care Occupation President | Aggregate Year-to-Date ▼ 10000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. George Roggensack | | Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2006 |
| Mailing Address 1014 Hillside Ave | | Transaction ID: SA11A1.25018 |
| City State Zip Code Madison WI 53705-1117 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Madison Radiologists Occupation Physician | Aggregate Year-to-Date ▼ 250.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 7250.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

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

Mailing Address 1610 N. Prospect #203

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2006

Transaction ID: SA11A1.25024

Amount of Each Receipt this Period
75.00

Contribution

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

Mailing Address 1418 Pleasure Drive

City State Zip Code
Madison WI 53704

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

Name of Employer Occupation
RPW Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1527.65

Date of Receipt
MM / DD / YYYY
08 / 28 / 2006

Transaction ID: SA11A1.25034

Amount of Each Receipt this Period
1527.65

Contribution

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

Mailing Address 7312 Douglas Ave Box 396

City State Zip Code
Racine WI 53402

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

Name of Employer Occupation
Merit Gear Gear Maker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2006

Transaction ID: SA11A1.25035

Amount of Each Receipt this Period
100.00

Contribution

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1702.65 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Johan Segerdahl | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6 | |
| Mailing Address 601 E Lake Terrace | | Transaction ID: SA11A1.25036 | |
| City Glendale | State WI | Zip Code 53217 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Aggregate Year-to-Date ▼ 500.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. John Sensenbrenner | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6 | |
| Mailing Address 909 East Forest Avenue | | Transaction ID: SA11A1.25038 | |
| City Neenah | State WI | Zip Code 54956 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 500.00 | | |

| | | | |
|---|--|---|---|
| Full Name (Last, First, Middle Initial) C. John Sensenbrenner | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 | |
| Mailing Address 909 East Forest Avenue | | Transaction ID: SA11A1.25039 | |
| City Neenah | State WI | Zip Code 54956 | Amount of Each Receipt this Period 35.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 535.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 785.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Joan Stein

Mailing Address 2055 West Dean Road

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: SA11A1.25040

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Frederick Stratton

Mailing Address 9608 N Juniper Circle

City State Zip Code
Mequon WI 53092

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

Name of Employer Occupation
Briggs & Stratton Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2006

Transaction ID: SA11A1.25041

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address 915 Maruknoll Cir

City State Zip Code
Glen Ellyn WI 60137

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
305.53

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.25232

Amount of Each Receipt this Period
305.53

Contribution

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1305.53 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 76 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. John Van Hollen | | Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006 | |
| Mailing Address Rr 2 | | Transaction ID: SA11A1.25042 | |
| City Mason | State WI | Amount of Each Receipt this Period 10000.00 | |
| Zip Code 54856 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Northern Lights Manor | Occupation RN | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. William Ward | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006 | |
| Mailing Address N3396 County Road G | | Transaction ID: SA11A1.25046 | |
| City Fort Atkinson | State WI | Amount of Each Receipt this Period 500.00 | |
| Zip Code 53539-9183 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer N/A | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Larry Weiss | | Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2006 | |
| Mailing Address 1117 Sweetbriar Lane | | Transaction ID: SA11A1.25051 | |
| City Hartland | State WI | Amount of Each Receipt this Period 300.00 | |
| Zip Code 53029 | | Contribution | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer N/A | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 10800.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 28 / 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Timothy Wengert | | Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006 |
| Mailing Address 1220 Ridge Rd | | Transaction ID: SA11A1.25052 |
| City State Zip Code Marshfield WI 54449 | Amount of Each Receipt this Period 35.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Aggregate Year-to-Date ▼ 235.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Greg Wolf | | Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006 |
| Mailing Address 1559 Fox Ridge Court | | Transaction ID: SA11A1.25053 |
| City State Zip Code De Pere WI 54115 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Contribution |
| Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Aggregate Year-to-Date ▼ 500.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 535.00 |
| TOTAL This Period (last page this line number only) | 85954.18 |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 29 / 76 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input checked="" type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
CANTOR FOR CONGRESS

Mailing Address P. O. Box 17813

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23226 |

FEC ID number of contributing federal political committee. **C** C00355461

| | |
|------------------|------------|
| Name of Employer | Occupation |
| | |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 0 | / | 2 | 0 | 0 | 6 |

Transaction ID: SA11B.25073

Amount of Each Receipt this Period
1000.00

Contribution

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 1000.00 |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 30 / 76 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. COMMITTEE FOR THE PRESERVATION OF CAPITALISM (GPC), THE | | Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2006 |
| Mailing Address P.O. Box 65314 | | Transaction ID: SA11C.25069 |
| City State Zip Code Washington DC 20036 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00328468 | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 2000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. CONGRESSIONAL MAJORITY COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006 |
| Mailing Address P. O. BOX 746 | | Transaction ID: SA11C.25067 |
| City State Zip Code Bakersfield CA 93302 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C C00117721 | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 5000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. MARSHALL AND ILSLEY CORPORATION POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2006 |
| Mailing Address 770 N WATER STREET | | Transaction ID: SA11C.25239 |
| City State Zip Code MILWAUKEE WI 53202 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C C00170696 | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 500.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 7500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 76 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. MIDNIGHT SUN POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006 |
| Mailing Address PO BOX 75181 | | Transaction ID: SA11C.25242 |
| City State Zip Code WASHINGTON DC 20013 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00345199 | Contribution | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Aggregate Year-to-Date ▼ 1000.00 | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. RELY ON YOUR BELIEFS FUND | | Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2006 |
| Mailing Address 209 Pennsylvania Avenue SE | | Transaction ID: SA11C.25071 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00344648 | Contribution | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Aggregate Year-to-Date ▼ 1000.00 | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. TDS Telecom PAC | | Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006 |
| Mailing Address PO Box 5158 | | Transaction ID: SA11C.25244 |
| City State Zip Code Madison WI 53705 | Amount of Each Receipt this Period 1500.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Aggregate Year-to-Date ▼ 1500.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3500.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 32 / 76 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

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

Mailing Address 122 C Street NW
Suite 840

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 6 |

Transaction ID: SA11C.25245

Amount of Each Receipt this Period
1000.00

Contribution

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 12000.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 / 76 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. MICHIGAN REPUBLICAN PARTY | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2006 |
| Mailing Address 520 Seymour St. | | Transaction ID: SA12.25077 |
| City State Zip Code Lansing MI 48933 | Amount of Each Receipt this Period 17000.00 | |
| FEC ID number of contributing federal political committee. C C00041160 | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 17000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Republican National Committee | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 11 / 2006 |
| Mailing Address 310 1st Street SE | | Transaction ID: SA12.25226 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 50000.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 50000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Republican National Committee | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 25 / 2006 |
| Mailing Address 310 1st Street SE | | Transaction ID: SA12.25227 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 50000.00 | |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 100000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 117000.00 |
| TOTAL This Period (last page this line number only) ▶ | 117000.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|------------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 34 / 76 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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| |
|--|
| NAME OF COMMITTEE (In Full) Republican Party of Wisconsin |
|--|

| | |
|---|------------------------------------|
| Full Name (Last, First, Middle Initial) A. United States Postal Services | |
| Mailing Address PO Box 5066 | |
| City Milwaukee | State WI |
| Zip Code 53201-5066 | |
| FEC ID number of contributing federal political committee. C | |
| Name of Employer | Occupation |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 697.32 |

| |
|--|
| Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006 |
| Transaction ID: SA15.25079 |
| Amount of Each Receipt this Period 697.32 |
| Reimbursements for BMR Mail |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 697.32 |
| TOTAL This Period (last page this line number only) | ▶ | 697.32 |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Allied Insurance Center | | Transaction ID: SB21B.25094 |
| Mailing Address 12750 W. North Avenue | | Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| City Brookfield | State WI | Zip Code 53005 |
| Purpose of Disbursement Insurance | Amount of Each Disbursement this Period 3120.50 | |
| 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. Applied Research Coordinates | | Transaction ID: SB21B.25095 |
| Mailing Address 2310 St. Bede's Court | | Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| City Reston | State VA | Zip Code 20191-1621 |
| Purpose of Disbursement Political Consultant | Amount of Each Disbursement this Period 1081.07 | |
| 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. Best Buy | | Transaction ID: SB21B.25212 |
| Mailing Address Store#59 | | Date of Disbursement MM / DD / YYYY 04 / 03 / 2006 |
| City Madison | State WI | Zip Code 53704 |
| Purpose of Disbursement Office supplies | Amount of Each Disbursement this Period 1050.67 | |
| 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: | | |

[MEMO ITEM]

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4201.57 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Broadmoor Hotel | | Transaction ID: SB21B.25210 Date of Disbursement MM / DD / YYYY 03 / 23 / 2006 |
| Mailing Address 1 Lake Avenue | | Amount of Each Disbursement this Period 289.91 |
| City Colorado Springs State CO Zip Code 80906 | Purpose of Disbursement Hotel room Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] |
| Category/Type | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. CLS Services Inc. | | Transaction ID: SB21B.25096 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| Mailing Address N172 South Park Drive | | Amount of Each Disbursement this Period 30282.00 |
| City Appleton State WI Zip Code 54914-8404 | Purpose of Disbursement Yard Signs Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] |
| Category/Type | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Dane County Regional Airport | | Transaction ID: SB21B.25204 Date of Disbursement MM / DD / YYYY 03 / 13 / 2006 |
| Mailing Address 4000 International Lane | | Amount of Each Disbursement this Period 21.00 |
| City Madison State WI Zip Code 53704 | Purpose of Disbursement Parking Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] |
| Category/Type | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 30282.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 37 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Doubletree Hotel | | Transaction ID: SB21B.25206 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 |
| Mailing Address 31500 Wick Road | | Amount of Each Disbursement this Period 381.80 [MEMO ITEM] |
| City Romulus State MI Zip Code 48174 | | |
| Purpose of Disbursement Hotel | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. FLS-DCI | | Transaction ID: SB21B.25261 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 2401 W Behrend Drive STE 7 | | Amount of Each Disbursement this Period 4000.00 |
| City Phoenix State AZ Zip Code 85027 | | |
| Purpose of Disbursement Prospecting phone calls - not FEA | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. FLS-DCI | | Transaction ID: SB21B.25263 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 2401 W Behrend Drive STE 7 | | Amount of Each Disbursement this Period 4000.00 |
| City Phoenix State AZ Zip Code 85027 | | |
| Purpose of Disbursement Prospecting phone calls - FEA | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 38 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. LexisNexis | | Transaction ID: SB21B.25100 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 | |
| Mailing Address PO BOX 2314 | | Amount of Each Disbursement this Period 200.00 | |
| City Carol Stream State IL Zip Code 60132-2314 | Purpose of Disbursement Subscription Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. James R. Long | | Transaction ID: SB21B.25099 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006 | |
| Mailing Address 5735 West Spencer Street | | Amount of Each Disbursement this Period 1000.00 | |
| City Appleton State WI Zip Code 54914 | Purpose of Disbursement Field Office Rent Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. M&I Bank Credit Card Processing Center | | Transaction ID: SB21B.25101 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006 | |
| Mailing Address PO Box 3052 | | Amount of Each Disbursement this Period 2370.19 | |
| City Milwaukee State WI Zip Code 53201 | Purpose of Disbursement Credit card charges Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3570.19 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 39 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. M&I Bank of Southern Wisconsin | | Transaction ID: SB21B.25203 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6 | |
| Mailing Address P.O. Box 5920 | | Amount of Each Disbursement this Period 43.56 | |
| City Madison State WI Zip Code 53705 | Purpose of Disbursement Bank 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: | [MEMO ITEM] | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. M&I Bank of Southern Wisconsin | | Transaction ID: SB21B.25102 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6 | |
| Mailing Address P.O. Box 5920 | | Amount of Each Disbursement this Period 577.48 | |
| City Madison State WI Zip Code 53705 | Purpose of Disbursement Credit card processing fee | Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. M&I Bank of Southern Wisconsin | | Transaction ID: SB21B.25103 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 | |
| Mailing Address P.O. Box 5920 | | Amount of Each Disbursement this Period 167.40 | |
| City Madison State WI Zip Code 53705 | Purpose of Disbursement Bank 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: | | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 744.88 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. M&I Bank of Southern Wisconsin | | Transaction ID: SB21B.25104 Date of Disbursement MM / DD / YYYY 08 / 31 / 2006 |
| Mailing Address P.O. Box 5920 | | Amount of Each Disbursement this Period 86.97 |
| City Madison State WI Zip Code 53705 | Purpose of Disbursement Service Charge Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Maelstrom Solutions Corporation | | Transaction ID: SB21B.25105 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| Mailing Address 250 N. Sunny Slope STE 300 | | Amount of Each Disbursement this Period 35.00 |
| City Brookfield State WI Zip Code 53005 | Purpose of Disbursement Website Design Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Metro/Advantage Cabs | | Transaction ID: SB21B.25205 Date of Disbursement MM / DD / YYYY 03 / 13 / 2006 |
| Mailing Address 2240 Deadrick Ave | | Amount of Each Disbursement this Period 31.80 |
| City Memphis State TN Zip Code 38114 | Purpose of Disbursement Cab fare Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

[MEMO ITEM]

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 121.97 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 41 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Milwaukee Journal Sentinel | | Transaction ID: SB21B.25213 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6 | |
| Mailing Address PO Box 2929 | | Amount of Each Disbursement this Period 212.50 | |
| City Milwaukee State WI Zip Code 53201 | Purpose of Disbursement Subscription renewal | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Northwest Airlines | | Transaction ID: SB21B.25209 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 | |
| Mailing Address 1 Northwest Rd | | Amount of Each Disbursement this Period 278.69 | |
| City Livonia State MI Zip Code 48152-3938 | Purpose of Disbursement Airfare | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Paypal, Inc. | | Transaction ID: SB21B.25207 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6 | |
| Mailing Address #774100, 4100 Solutions Center | | Amount of Each Disbursement this Period 19.95 | |
| City Chicago State IL Zip Code 60677-4001 | Purpose of Disbursement Credit card processing fee | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Pfister Hotel | | Transaction ID: SB21B.25177 Date of Disbursement 08 / 15 / 2006 | |
| Mailing Address 424 East Wisconsin Ave | | Amount of Each Disbursement this Period 1000.00 | |
| City Milwaukee State WI Zip Code 53202 | Purpose of Disbursement Room rental deposit | 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: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Radisson Hotel LaCrosse | | Transaction ID: SB21B.25214 Date of Disbursement 04 / 10 / 2006 | |
| Mailing Address 200 Harborview Plaza | | Amount of Each Disbursement this Period 11.14 | |
| City LaCrosse State WI Zip Code 54601 | Purpose of Disbursement Meal | 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: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

[MEMO ITEM]

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Reflections Photography | | Transaction ID: SB21B.25180 Date of Disbursement 08 / 31 / 2006 | |
| Mailing Address 631 Pennsylvania Ave SE | | Amount of Each Disbursement this Period 1043.75 | |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement Photos | 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: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2043.75 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|--|
| A. RNC Full Name (Last, First, Middle Initial) Mailing Address 310 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Seminar fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB21B.25208 Date of Disbursement: M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] |
|---|--|--|

| | | |
|---|--|--|
| B. U.S. Postal Service Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 5066 City Milwaukee State WI Zip Code 53201-5066 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB21B.25179 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00 |
|---|--|--|

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|--|--|--|
| C. Unisource Direct Full Name (Last, First, Middle Initial) Mailing Address 925 Harrington Drive City Madison State WI Zip Code 53718 Purpose of Disbursement Finance mailing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB21B.25106 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00 |
|--|--|--|

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 6000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Unisource Direct | | Transaction ID: SB21B.25108 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| Mailing Address 925 Harrington Drive | | Amount of Each Disbursement this Period 3660.00 |
| City Madison State WI Zip Code 53718 | Purpose of Disbursement Finance mailing Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Unisource Direct | | Transaction ID: SB21B.25109 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| Mailing Address 925 Harrington Drive | | Amount of Each Disbursement this Period 1000.00 |
| City Madison State WI Zip Code 53718 | Purpose of Disbursement Finance mailing Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Unisource Direct | | Transaction ID: SB21B.25110 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006 |
| Mailing Address 925 Harrington Drive | | Amount of Each Disbursement this Period 1886.11 |
| City Madison State WI Zip Code 53718 | Purpose of Disbursement Finance mailing Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 6546.11 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Unisource Direct | | Transaction ID: SB21B.25111 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 925 Harrington Drive | | Amount of Each Disbursement this Period 2465.00 |
| City Madison State WI Zip Code 53718 | Purpose of Disbursement Finance Mailing Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. VMPS. LLC | | Transaction ID: SB21B.25247 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address PO Box 2741 | | Amount of Each Disbursement this Period 12500.00 |
| City Madison State WI Zip Code 53701 | Purpose of Disbursement Political Consulting Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. VMPS. LLC | | Transaction ID: SB21B.25182 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 |
| Mailing Address PO Box 2741 | | Amount of Each Disbursement this Period 3000.00 |
| City Madison State WI Zip Code 53701 | Purpose of Disbursement Political Consultant Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 17965.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Windway Capital Corp | | Transaction ID: SB21B.25113 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 630 Riverfront Drive #200 | | Amount of Each Disbursement this Period 5000.00 |
| City Sheboygan State WI Zip Code 53082 | Purpose of Disbursement List development | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Wisc. Dept of Revenue | | Transaction ID: SB21B.25267 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address PO Box 93208 | | Amount of Each Disbursement this Period 832.02 |
| City Milwaukee State WI Zip Code 53293 | Purpose of Disbursement Payroll tax | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Wisc. Dept of Revenue - Sls Tax | | Transaction ID: SB21B.25114 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 |
| Mailing Address PO Box 93389 | | Amount of Each Disbursement this Period 580.06 |
| City Milwaukee State WI Zip Code 53293 | Purpose of Disbursement Sales/Use Tax | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) | 6412.08 |
| TOTAL This Period (last page this line number only) | 85887.55 |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. American Funds Service Company | | Transaction ID: SB30B.25117 | |
| Mailing Address PO Box 6164 | | Date of Disbursement MM / DD / YYYY 08 / 17 / 2006 | |
| City Indianapolis | State IN | Zip Code 46206 | Amount of Each Disbursement this Period 897.68 |
| Purpose of Disbursement Employee Simple IRA | | 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. American Funds Service Company | | Transaction ID: SB30B.25118 | |
| Mailing Address PO Box 6164 | | Date of Disbursement MM / DD / YYYY 08 / 31 / 2006 | |
| City Indianapolis | State IN | Zip Code 46206 | Amount of Each Disbursement this Period 932.21 |
| Purpose of Disbursement Employee Simple IRA | | 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. Kimberly Barton | | Transaction ID: SB30B.25119 | |
| Mailing Address N24W30863 Fairway Ct | | Date of Disbursement MM / DD / YYYY 08 / 14 / 2006 | |
| City Pewaukee | State WI | Zip Code 53072 | Amount of Each Disbursement this Period 199.43 |
| Purpose of Disbursement Payroll | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

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| SUBTOTAL of Disbursements This Page (optional) | 2029.32 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ben Gorges | | Transaction ID: SB30B.25120 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address N2001 County Road W | | Amount of Each Disbursement this Period 416.27 |
| City New London State WI Zip Code 54961 | Purpose of Disbursement Mileage Reimbursement Candidate Name <input type="checkbox"/> Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Dudley Bowlby | | Transaction ID: SB30B.25121 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 250 Femrite Drive | | Amount of Each Disbursement this Period 664.24 |
| City Madison State WI Zip Code 53716 | Purpose of Disbursement Payroll Candidate Name <input type="checkbox"/> Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Dudley Bowlby | | Transaction ID: SB30B.25122 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 250 Femrite Drive | | Amount of Each Disbursement this Period 771.77 |
| City Madison State WI Zip Code 53716 | Purpose of Disbursement Payroll Candidate Name <input type="checkbox"/> Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1852.28 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Andrew Davis | | Transaction ID: SB30B.25123 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 827 Michigan Ave | | Amount of Each Disbursement this Period 1093.29 |
| City South Milwaukee State WI Zip Code 53172 | Category/ Type | |
| Purpose of Disbursement Reimbursement for Supplies | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Andrew Davis | | Transaction ID: SB30B.25124 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 827 Michigan Ave | | Amount of Each Disbursement this Period 798.76 |
| City South Milwaukee State WI Zip Code 53172 | Category/ Type | |
| Purpose of Disbursement Payroll | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Andrew Davis | | Transaction ID: SB30B.25125 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 827 Michigan Ave | | Amount of Each Disbursement this Period 1491.61 |
| City South Milwaukee State WI Zip Code 53172 | Category/ Type | |
| Purpose of Disbursement Payroll | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3383.66 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Dean Care | | Transaction ID: SB30B.25126 Date of Disbursement MM / DD / YYYY 08 / 31 / 2006 |
| Mailing Address PO Box 88610 | | Amount of Each Disbursement this Period 6610.93 |
| City Milwaukee | State WI Zip Code 53288 | |
| Purpose of Disbursement Health Insurance | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Robert Delaporte | | Transaction ID: SB30B.25129 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006 |
| Mailing Address 5657 Barbara Dr | | Amount of Each Disbursement this Period 52.23 |
| City Fitchburg | State WI Zip Code 53711 | |
| Purpose of Disbursement Equipment Rental Reimbursement | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Robert Delaporte | | Transaction ID: SB30B.25127 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006 |
| Mailing Address 5657 Barbara Dr | | Amount of Each Disbursement this Period 2072.63 |
| City Fitchburg | State WI Zip Code 53711 | |
| Purpose of Disbursement Payroll | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8735.79 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| A. Robert Delaporte Full Name (Last, First, Middle Initial) | | Transaction ID: SB30B.25128 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 5657 Barbara Dr | | Amount of Each Disbursement this Period 2072.64 |
| City Fitchburg State WI Zip Code 53711 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| B. Richard Dickie Full Name (Last, First, Middle Initial) | | Transaction ID: SB30B.25130 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 126 North Blair Street #1 | | Amount of Each Disbursement this Period 1070.69 |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| C. Richard Dickie Full Name (Last, First, Middle Initial) | | Transaction ID: SB30B.25131 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 126 North Blair Street #1 | | Amount of Each Disbursement this Period 1067.93 |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4211.26 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Brett Frazier | | Transaction ID: SB30B.25132 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006 | |
| Mailing Address 380 W. Washington Ave, #409 | | Amount of Each Disbursement this Period 416.30 | |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Brett Frazier | | Transaction ID: SB30B.25133 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006 | |
| Mailing Address 380 W. Washington Ave, #409 | | Amount of Each Disbursement this Period 255.47 | |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Jason Gammeter | | Transaction ID: SB30B.25134 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006 | |
| Mailing Address 367 East Monroe St | | Amount of Each Disbursement this Period 246.44 | |
| City Wycocena State WI Zip Code 53969 | Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 918.21 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Jason Gammeter | | Transaction ID: SB30B.25135 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 367 East Monroe St | | Amount of Each Disbursement this Period 428.15 |
| City Wycena State WI Zip Code 53969 | Category/ Type | |
| Purpose of Disbursement Payroll | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Benjamin Gorges | | Transaction ID: SB30B.25136 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 716 E Grand Ave #215 | | Amount of Each Disbursement this Period 428.28 |
| City Eau Claire State WI Zip Code 54703 | Category/ Type | |
| Purpose of Disbursement Payroll | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Guardian | | Transaction ID: SB30B.25137 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 |
| Mailing Address PO Box 95101 | | Amount of Each Disbursement this Period 1117.14 |
| City Chicago State IL Zip Code 60694 | Category/ Type | |
| Purpose of Disbursement Dental Insurance | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1973.57 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 54 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Jeff Harvey | | Transaction ID: SB30B.25138 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 2937 Fish Hatchery Rd #112 | | Amount of Each Disbursement this Period 1333.61 |
| City Madison State WI Zip Code 53713 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Jeff Harvey | | Transaction ID: SB30B.25139 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 2937 Fish Hatchery Rd #112 | | Amount of Each Disbursement this Period 1757.99 |
| City Madison State WI Zip Code 53713 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Donna Heimbach | | Transaction ID: SB30B.25140 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 3002 Dianne Drive | | Amount of Each Disbursement this Period 485.37 |
| City Middleton State WI Zip Code 53562 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3576.97 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 55 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| <p>A. Donna Heimbach</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3002 Dianne Drive</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: SB30B.25141</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="438.88"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | | |
|---|--|---|
| <p>B. Alexandria Higgins</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 328 Ash Street</p> <p>City Sauk City State WI Zip Code 53583</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: SB30B.25188</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1495.57"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | | |
|---|--|---|
| <p>C. Alexandria Higgins</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 328 Ash Street</p> <p>City Sauk City State WI Zip Code 53583</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: SB30B.25190</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="66.61"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | |
|---|---|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="2001.06"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text"/></p> |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 56 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|---|-------------|---|--|
| Full Name (Last, First, Middle Initial) A. Alexandria Higgins | | Transaction ID: SB30B.25191 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006 | |
| Mailing Address 328 Ash Street | | Amount of Each Disbursement this Period 1259.10 | |
| City Sauk City | State WI | Zip Code 53583 | |
| Purpose of Disbursement Payroll | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|-------------|---|--|
| Full Name (Last, First, Middle Initial) B. IRS | | Transaction ID: SB30B.25184 Date of Disbursement MM / DD / YYYY 08 / 16 / 2006 | |
| Mailing Address Payment Center | | Amount of Each Disbursement this Period 261.18 | |
| City Kansas City | State MO | Zip Code 64999 | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|-------------|---|--|
| Full Name (Last, First, Middle Initial) C. IRS | | Transaction ID: SB30B.25185 Date of Disbursement MM / DD / YYYY 08 / 16 / 2006 | |
| Mailing Address Payment Center | | Amount of Each Disbursement this Period 10652.85 | |
| City Kansas City | State MO | Zip Code 64999 | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 12173.13 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Kimberly Jorns | | Transaction ID: SB30B.25143 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 233 N. Broadway #136 | | Amount of Each Disbursement this Period 1396.23 |
| City De Pere State WI Zip Code 54115 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Brian Kind | | Transaction ID: SB30B.25144 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 6403 Alison Ln | | Amount of Each Disbursement this Period 1495.33 |
| City Madison State WI Zip Code 53711 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Brian Kind | | Transaction ID: SB30B.25145 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 6403 Alison Ln | | Amount of Each Disbursement this Period 1495.32 |
| City Madison State WI Zip Code 53711 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4386.88 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 59 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Jill Latham | | Transaction ID: SB30B.25146 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 5550 Caddis Bend #405 | | Amount of Each Disbursement this Period 1458.28 |
| City Fitchburg State WI Zip Code 53711 | | |
| Purpose of Disbursement Payroll Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Jill Latham | | Transaction ID: SB30B.25147 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 5550 Caddis Bend #405 | | Amount of Each Disbursement this Period 1399.16 |
| City Fitchburg State WI Zip Code 53711 | | |
| Purpose of Disbursement Payroll Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Larry Loomis | | Transaction ID: SB30B.25148 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 3157 Muir Field Road #47 | | Amount of Each Disbursement this Period 409.53 |
| City Madison State WI Zip Code 53719 | | |
| Purpose of Disbursement Payroll Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3266.97 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 60 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|--|
| <p>A. Larry Loomis</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3157 Muir Field Road #47</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: SB30B.25149</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="523.75"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | | |
|---|--|--|
| <p>B. Ryan Mahoney</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7608 Hamilton Spring Rd</p> <p>City Bethesda State MD Zip Code 20817</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: SB30B.25150</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="375.30"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | | |
|---|--|--|
| <p>C. Ryan Mahoney</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7608 Hamilton Spring Rd</p> <p>City Bethesda State MD Zip Code 20817</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: SB30B.25151</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="339.63"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | |
|---|---|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="1238.68"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text"/></p> |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 61 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Thomas Mooney | | Transaction ID: SB30B.25152 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 163 Avon St. Apt 4 | | Amount of Each Disbursement this Period 978.00 |
| City La Crosse State WI Zip Code 54603 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Thomas Mooney | | Transaction ID: SB30B.25153 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address 163 Avon St. Apt 4 | | Amount of Each Disbursement this Period 1144.75 |
| City La Crosse State WI Zip Code 54603 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Jeffery Noltner | | Transaction ID: SB30B.25154 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 1543 Langley Lane | | Amount of Each Disbursement this Period 49.64 |
| City Madison State WI Zip Code 53718 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2172.39 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| A. Jeffery Noltner Full Name (Last, First, Middle Initial) Mailing Address 1543 Langley Lane City Madison State WI Zip Code 53718 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25155 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 59.19 Category/Type |
|--|--|---|

| | | |
|--|--|---|
| B. Leslie Oehmen Full Name (Last, First, Middle Initial) Mailing Address 5018 Paulson Court #3 City McFarland State WI Zip Code 53558 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25162 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 1092.29 Category/Type |
|--|--|---|

| | | |
|---|--|--|
| C. Sherrie Osegard Full Name (Last, First, Middle Initial) Mailing Address 2346 Talc Trail #208 City Madison State WI Zip Code 53719 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25156 Date of Disbursement 08 / 14 / 2006 Amount of Each Disbursement this Period 926.65 Category/Type |
|---|--|--|

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2078.13 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Sherrie Osegard | | Transaction ID: SB30B.25157 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 | |
| Mailing Address 2346 Talc Trail #208 | | Amount of Each Disbursement this Period 926.65 | |
| City Madison State WI Zip Code 53719 | Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Scott Poole | | Transaction ID: SB30B.25158 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 | |
| Mailing Address 445 West Gilman #202 | | Amount of Each Disbursement this Period 471.94 | |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Scott Poole | | Transaction ID: SB30B.25159 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 | |
| Mailing Address 445 West Gilman #202 | | Amount of Each Disbursement this Period 605.28 | |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2003.87 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 64 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|--|
| A. Karoline Rezin Full Name (Last, First, Middle Initial) Mailing Address 1836 Gruman City Tomah State WI Zip Code 54660 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25197 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 417.86 Category/Type |
|---|--|--|

| | | |
|--|--|--|
| B. Daniel Romportl Full Name (Last, First, Middle Initial) Mailing Address 841 Skibborean Way City Hartford State WI Zip Code 53027 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25200 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 822.61 Category/Type |
|--|--|--|

| | | |
|---|--|--|
| C. James Sanders Full Name (Last, First, Middle Initial) Mailing Address 4510 Texas Trail City Madison State WI Zip Code 53704 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25160 Date of Disbursement 08 / 14 / 2006 Amount of Each Disbursement this Period 614.52 Category/Type |
|---|--|--|

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1854.99 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|---|--|--|
| A. James Sanders Full Name (Last, First, Middle Initial) Mailing Address 4510 Texas Trail City Madison State WI Zip Code 53704 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25161 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 652.30 Category/Type |
|---|--|--|

| | | |
|---|--|---|
| B. Rick Wiley Full Name (Last, First, Middle Initial) Mailing Address 529 Aztalan Drive City Madison State WI Zip Code 53718 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25164 Date of Disbursement 08 / 14 / 2006 Amount of Each Disbursement this Period 2527.32 Category/Type |
|---|--|---|

| | | |
|---|--|---|
| C. Rick Wiley Full Name (Last, First, Middle Initial) Mailing Address 529 Aztalan Drive City Madison State WI Zip Code 53718 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB30B.25165 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 2051.06 Category/Type |
|---|--|---|

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5230.68 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 66 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Joshua Wilson | | Transaction ID: SB30B.25166 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 641 West Main Street | | Amount of Each Disbursement this Period 451.83 |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Joshua Wilson | | Transaction ID: SB30B.25167 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 |
| Mailing Address 641 West Main Street | | Amount of Each Disbursement this Period 550.50 |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Payroll | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue | | Transaction ID: SB30B.25168 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 |
| Mailing Address PO Box 93208 | | Amount of Each Disbursement this Period 2137.00 |
| City Milwaukee State WI Zip Code 53293 | Purpose of Disbursement Payroll Taxes | |
| Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3139.33 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 67 / 76

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Wisc. Dept of Revenue | | Transaction ID: SB30B.25169 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 |
| Mailing Address PO Box 93208 | | Amount of Each Disbursement this Period 53.07 |
| City Milwaukee State WI Zip Code 53293 | Category/ Type | |
| Purpose of Disbursement Payroll Taxes | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Wisc. Dept of Revenue | | Transaction ID: SB30B.25170 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 |
| Mailing Address PO Box 93208 | | Amount of Each Disbursement this Period 1469.81 |
| City Milwaukee State WI Zip Code 53293 | Category/ Type | |
| Purpose of Disbursement Payroll Taxes | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Wisc. Dept of Revenue | | Transaction ID: SB30B.25171 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 |
| Mailing Address PO Box 93208 | | Amount of Each Disbursement this Period 27.18 |
| City Milwaukee State WI Zip Code 53293 | Category/ Type | |
| Purpose of Disbursement Payroll Taxes | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1550.06 |
| TOTAL This Period (last page this line number only) ▶ | 76557.69 |

SCHEDULE C (FEC Form 3X)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 68 / 76 FOR LINE 13 OF FORM 3X |
|---|--|

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

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

| | | |
|--------------------------------------|--|---|
| Original Amount of Loan 110000.00 | Cumulative Payment To Date 69000.00 | Balance Outstanding at Close of This Period 41000.00 |
|--------------------------------------|--|---|

TERMS

| | | | |
|---|----------------------|-------------------------------|---|
| Date Incurred MM DD YY 01 09 2002 | Date Due 04/30/02 | Interest Rate 5.75 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|----------------------|-------------------------------|---|

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

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

| | |
|--|--|
| SUBTOTALS This Period This Page (optional) ▶ | <input style="width: 100%;" type="text" value="41000.00"/> |
| TOTALS This Period (last page in this line only) ▶ | <input style="width: 100%;" type="text"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3X)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 69 / 76 FOR LINE 13 OF FORM 3X |
|---|--|

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

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

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 34000.00 | 0.00 | 34000.00 |

TERMS

| | | | |
|---------------------------------------|----------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M M 1 2 D D 3 1 Y Y Y Y 2 0 0 3 | | 5.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

| | |
|--|--|
| SUBTOTALS This Period This Page (optional) ▶ | <input style="width: 100%;" type="text" value="34000.00"/> |
| TOTALS This Period (last page in this line only) ▶ | <input style="width: 100%;" type="text" value="75000.00"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 70 / 76 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS-DCI | Nature of Debt (Purpose): prospecting calls - not FEA |
| Mailing Address 2401 W Behrend Drive STE 7 | |
| City State ZIP Code Phoenix AZ 85027 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID: SD10.24858 | |
| 18662.55 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 8000.00 | 10662.55 |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 10662.55 |
| 2) TOTALS This Period (last page this line number only)..... | 10662.55 |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | | | |
|---|-------------|-------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 85460 | | | Allocated Activity or Event Year-To-Date 113229.89 | | |
| City Louisville | State KY | Zip Code 40285 | Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2006"/> | | |
| Purpose of Disbursement: Postage | | | Transaction ID: H4.25173 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 657.85 | | 2474.78 | | 3132.63 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Capital Newspapers | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 8759 | | | Allocated Activity or Event Year-To-Date 113608.69 | | |
| City Madison | State WI | Zip Code 53708 | Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> | | |
| Purpose of Disbursement: Subscription renewal | | | Transaction ID: H4.25082 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 79.55 | | 299.25 | | 378.80 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) CMS | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address P.O. Box 628306 | | | Allocated Activity or Event Year-To-Date 114106.69 | | |
| City Middleton | State WI | Zip Code 53562 | Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> | | |
| Purpose of Disbursement: Cleaning service | | | Transaction ID: H4.25083 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 104.58 | | 393.42 | | 498.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 841.98 | | 3167.45 | | 4009.43 |

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

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | | | |
|---|-------------|-------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Coca-Cola Bottling Company | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 86 | | | Allocated Activity or Event Year-To-Date 114217.30 | | |
| City Minneapolis | State MN | Zip Code 55486 | | | |
| Purpose of Disbursement: Office Soda | | | Category/ Type | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 23.23 | | 87.38 | | 110.61 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) FedEx | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 1140 | | | Allocated Activity or Event Year-To-Date 114237.39 | | |
| City Memphis | State TN | Zip Code 38101 | | | |
| Purpose of Disbursement: Shipping - not FEA | | | Category/ Type | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.22 | | 15.87 | | 20.09 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) J & B Lawn Service | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 3554 Lake Farm Rd | | | Allocated Activity or Event Year-To-Date 114417.80 | | |
| City Madison | State WI | Zip Code 53711 | | | |
| Purpose of Disbursement: Lawn care | | | Category/ Type | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 37.89 | | 142.52 | | 180.41 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 65.34 | | 245.77 | | 311.11 |

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

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

| | | | | | |
|--|-------------|-------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Kramer Printing | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 5515 Catfish Court | | | Allocated Activity or Event Year-To-Date 114470.47 | | |
| City Wauwaukee | State WI | Zip Code 53597 | Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> | | |
| Purpose of Disbursement: Printing - not FEA | | | Transaction ID: H4.25087 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 11.06 | | 41.61 | | 52.67 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Neenah Springs | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 9 | | | Allocated Activity or Event Year-To-Date 114501.42 | | |
| City Oxford | State WI | Zip Code 53952 | Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> | | |
| Purpose of Disbursement: Bottled water | | | Transaction ID: H4.25088 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.50 | | 24.45 | | 30.95 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Office Depot | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 9027 | | | Allocated Activity or Event Year-To-Date 114586.13 | | |
| City Des Moines | State IA | Zip Code 50368 | Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> | | |
| Purpose of Disbursement: Office supplies | | | Transaction ID: H4.25089 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.79 | | 66.92 | | 84.71 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 35.35 | | 132.98 | | 168.33 |

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

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Office Max

Mailing Address
2420 East Springs Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Madison | WI | 53701 |

Purpose of Disbursement:
Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

114700.60

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 5 | / | 2 | 0 | 0 | 6 |

Transaction ID: H4.25090

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 24.04 | | 90.43 | | 114.47 |

B. Full Name (Last, First, Middle Initial)
Service Specialists Inc

Mailing Address
PO Box 160

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Sun Prairie | WI | 53590 |

Purpose of Disbursement:
Building Maintenance

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115506.73

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 5 | / | 2 | 0 | 0 | 6 |

Transaction ID: H4.25091

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 169.29 | | 636.84 | | 806.13 |

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

Mailing Address
PO Box 9001505

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Louisville | KY | 40290 |

Purpose of Disbursement:
Rubbish removal

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115615.48

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 5 | / | 2 | 0 | 0 | 6 |

Transaction ID: H4.25092

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 22.84 | | 85.91 | | 108.75 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 216.17 | | 813.18 | | 1029.35 |

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

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Pitney Bowes Credit Corp

Mailing Address
PO Box 85460

City State Zip Code
Louisville KY 40285

Purpose of Disbursement:
Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115864.94

Date 08 / 15 / 2006

Transaction ID: H4.25172

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 52.39 | | 197.07 | | 249.46 |

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

Mailing Address
231 W Michigan Street

City State Zip Code
Milwaukee WI 53203

Purpose of Disbursement:
Utility Bill

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117233.91

Date 08 / 31 / 2006

Transaction ID: H4.25093

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 287.48 | | 1081.49 | | 1368.97 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 339.87 | | 1278.56 | | 1618.43 |

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

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| 1498.71 | 5637.94 | 7136.65 |

Image# 26950498111

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