

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) THE WISCO PROJECT PAC			FEC IDENTIFICATION NUMBER ▼ C C00873901		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			M M / D D / Y Y Y Y Y Y		
Full Name of Payee Wisco Project, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2024		
Mailing Address 4230 N OAKLAND AVE BOX 225			Amount 29084.60		
City State Zip Code Shorewood WI 53211		Transaction ID : SE.4361 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2024			
Purpose of Expenditure 10/15-10/30 Salary estimate		Category/ Type 001			
Name of Federal Candidate Harris, Kamala, , ,		☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		969027.36		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee Wisco Project, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2024		
Mailing Address 4230 N OAKLAND AVE BOX 225			Amount 23267.68		
City State Zip Code Shorewood WI 53211		Transaction ID : SE.4362 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2024			
Purpose of Expenditure 10/15-10/30 Salary estimate		Category/ Type 001			
Name of Federal Candidate Baldwin, Tammy, , ,		☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought		398034.68		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			52352.28		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Sickel, Paul, , ,			Date M M / D D / Y Y Y Y Y Y 10 / 14 / 2024		

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NAME OF COMMITTEE (In Full) THE WISCO PROJECT PAC		FEC IDENTIFICATION NUMBER ▼ C C00873901
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Wisco Project, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2024	
Mailing Address 4230 N OAKLAND AVE BOX 225		Amount 1745.08	
City Shorewood	State WI	Zip Code 53211	Transaction ID : SE.4363
Purpose of Expenditure 10/15-10/30 Salary estimate		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024
Name of Federal Candidate Barca, Peter, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Wisco Project, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2024	
Mailing Address 4230 N OAKLAND AVE BOX 225		Amount 2908.46	
City Shorewood	State WI	Zip Code 53211	Transaction ID : SE.4364
Purpose of Expenditure 10/15-10/30 Salary estimate		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024
Name of Federal Candidate Cooke, Rebecca, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4653.54
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Sickel, Paul, , ,

Signature

Date

MM / DD / YYYY
10 / 14 / 2024

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Full Name of Payee Wisco Project, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2024
Mailing Address 4230 N OAKLAND AVE BOX 225		Amount 1163.38
City Shorewood	State WI	Zip Code 53211
Purpose of Expenditure 10/15-10/30 Salary estimate	Category/ Type 001	Transaction ID : SE.4365 Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024
Name of Federal Candidate Lyerly, Kristin, , ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee Wisco Project, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2024
Mailing Address 4230 N OAKLAND AVE BOX 225		Amount 110000.00
City Shorewood	State WI	Zip Code 53211
Purpose of Expenditure 10/18-11/5 GOTV Fellows estimate	Category/ Type 001	Transaction ID : SE.4366 Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2024
Name of Federal Candidate Harris, Kamala, , ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	111163.38
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Sickel, Paul, , ,
Signature

Date MM / DD / YYYY
10 / 14 / 2024

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Full Name of Payee Wisco Project, Inc.			Date of Public Distribution/Dissemination 10 / 18 / 2024	
Mailing Address 4230 N OAKLAND AVE BOX 225			Amount 88000.00	
City Shorewood	State WI	Zip Code 53211	Transaction ID : SE.4367	
Purpose of Expenditure 10/18-11/5 GOTV Fellows estimate		Category/ Type 001	Date of Disbursement or Obligation 11 / 06 / 2024	
Name of Federal Candidate Baldwin, Tammy, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought		516034.68	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	

Full Name of Payee Wisco Project, Inc.			Date of Public Distribution/Dissemination 10 / 18 / 2024	
Mailing Address 4230 N OAKLAND AVE BOX 225			Amount 6600.00	
City Shorewood	State WI	Zip Code 53211	Transaction ID : SE.4368	
Purpose of Expenditure 10/18-11/5 GOTV Fellows estimate		Category/ Type 001	Date of Disbursement or Obligation 11 / 06 / 2024	
Name of Federal Candidate Barca, Peter, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought		15624.60	Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	94600.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Sickel, Paul, , ,

Signature

Date

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Full Name of Payee Wisco Project, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2024	
Mailing Address 4230 N OAKLAND AVE BOX 225		Amount 11000.00	
City Shorewood	State WI	Zip Code 53211	Transaction ID : SE.4369
Purpose of Expenditure 10/18-11/5 GOTV Fellows estimate		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2024
Name of Federal Candidate Cooke, Rebecca, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

Full Name of Payee Wisco Project, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2024	
Mailing Address 4230 N OAKLAND AVE BOX 225		Amount 4400.00	
City Shorewood	State WI	Zip Code 53211	Transaction ID : SE.4370
Purpose of Expenditure 10/18-11/5 GOTV Fellows estimate		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2024
Name of Federal Candidate Lyerly, Kristin, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	15400.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	278169.20

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

Sickel, Paul, , ,
Signature

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