

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼**

Example: If typing, type over the lines.

12FE4M5

RON JOHNSON FOR SENATE, INC.

ADDRESS (number and street)

138 CONANT STREET

2ND FLOOR



Check if different than previously reported. (ACC)

BEVERLY

MA

01915

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00482984

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

STATE ▼ DISTRICT

WI

00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☒

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2019

through

M M / D D / Y Y Y Y

09 / 30 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Malczewski, James, J.,

Type or Print Name of Treasurer

Signature of Treasurer

Malczewski, James, J.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 15 / 2019

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 27

Write or Type Committee Name

RON JOHNSON FOR SENATE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	23357.67	1082234.32
(b) Total Contribution Refunds (from Line 20(d)) .....	2500.00	14100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	20857.67	1068134.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	39408.77	976995.01
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	10372.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	39408.77	966622.11
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	314804.91	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	320450.94	

## 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

PAGE 3 / 27

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

RON JOHNSON FOR SENATE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	9

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

## (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

4696.67

534017.67

(ii) Unitemized.....

661.00

43646.65

(iii) TOTAL of contributions from individuals ▶

5357.67

577664.32

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

18000.00

504570.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

23357.67

1082234.32

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

42605.71

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0.00

10372.90

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

773.19

44760.15

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

24130.86

1179973.08

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 27

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39408.77	976995.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	2000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	279549.06
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	279549.06
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	13600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	14100.00
21. OTHER DISBURSEMENTS .....	0.00	62900.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	41908.77	1335544.07

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	332582.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24130.86
25. SUBTOTAL (add Line 23 and Line 24).....	356713.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41908.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	314804.91

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 27

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

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NAME OF COMMITTEE (In Full)

**RON JOHNSON FOR SENATE, INC.**

Full Name (Last, First, Middle Initial)

**BARTZEN, PETER, , DR.,****A.**

Mailing Address 7420 LATIGO CIR

City

FRANKSVILLE

State

WI

Zip Code

53126-9468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADVOCATE AURORAOccupation  
PHYSICIAN

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	9

Transaction ID : SA11A.176479

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**GRETZ, KENLYN, T., ,****B.**

Mailing Address 652 LINCOLN RIDGE

City

GREEN BAY

State

WI

Zip Code

54313-7905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICOLLECT INCOccupation  
CEO

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	9

Transaction ID : SA11A.176480

Amount of Each Receipt this Period

246.67

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**HOWARD, HENRY, B., ,****C.**Mailing Address 1600 PONCE DE LEON BLVD  
SUITE 1106

City

CORAL GABLES

State

FL

Zip Code

33134-4095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. EDUCATION FINANCE GROUPOccupation  
PRESIDENT

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	9

Transaction ID : SA11A.176528

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶

3196.67

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RON JOHNSON FOR SENATE, INC.**

Full Name (Last, First, Middle Initial)

**LEWIS, MARY, , ,**

**A.**

Mailing Address 6506 BLUE WING DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22307-1338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 12 2019

Transaction ID : SA11A.176476

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BGR GOVERNMENT AFFAIRS, LLC**

**B.**

Mailing Address P.O. BOX 14416

City

WASHINGTON

State

DC

Zip Code

20044-4416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 12 2019

Transaction ID : SA11A.176477

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

; DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

**ROGERS, ED, , ,**

**C.**

Mailing Address 601 THIRTEENTH STREET NW  
11TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20005-3822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BGR GROUP

Occupation

FOUNDING PARTNER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 12 2019

Transaction ID : SA11A.176533

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

; DEBT RETIREMENT

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

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

1500.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RON JOHNSON FOR SENATE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**WOOD, ROBERT, D., MR.,**

Mailing Address **601 13TH STREET NORTHWEST**  
**ELEVENTH FLOOR SOUTH**

City **WASHINGTON** State **DC** Zip Code **20005-3807**

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

Name of Employer **BGR GROUP** Occupation **CONSULTANT**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**08 12 2019**

Transaction ID : **SA11A.176534**

Amount of Each Receipt this Period

**500.00**

☒ Memo Item

CONTRIBUTION

; DEBT RETIREMENT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

**0.00**

**4696.67**

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 27

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RON JOHNSON FOR SENATE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**ARGENTUM'S SILVER PAC**

Mailing Address 1650 KING ST  
SUITE 602

City ALEXANDRIA State VA Zip Code 22314-2747

FEC ID number of contributing federal political committee. **C** C00338020

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11C.176529

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

Mailing Address 208 S AKARD STREET  
FRONT 3521

City DALLAS State TX Zip Code 75202-4295

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2022  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 26 2019

Transaction ID : SA11C.176469

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION C**

Mailing Address 1400 16TH ST NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036-2225

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11C.176523

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

7000.00



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

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FOR LINE NUMBER:  
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PAGE 9 OF 27

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RON JOHNSON FOR SENATE, INC.**

Full Name (Last, First, Middle Initial)

**ERICSSON INC. U.S. EMPLOYEES POLITICAL ACTION COMMITTEE ('ER**

**A.**

Mailing Address 1776 EYE STREET NW  
SUITE 240

City

WASHINGTON

State

DC

Zip Code

20006-3703

FEC ID number of contributing  
federal political committee.

**C** C00568410

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11C.176525

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**FAA MANAGERS ASSOCIATION PAC**

**B.**

Mailing Address 53 BERNARD D

City

FORT MONROE

State

VA

Zip Code

23651-1001

FEC ID number of contributing  
federal political committee.

**C** C00366070

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11C.176522

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**GOOGLE NETPAC**

**C.**

Mailing Address 1101 NEW YORK AVE NW  
SECOND FLOOR

City

WASHINGTON

State

DC

Zip Code

20005-4344

FEC ID number of contributing  
federal political committee.

**C** C00428623

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11C.176532

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 27

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

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NAME OF COMMITTEE (In Full)  
**RON JOHNSON FOR SENATE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**JOHNSON CONTROLS INC. POLITICAL ACTION COMMITTEE**

Mailing Address 607 14TH ST NW  
SUITE 550

City  
WASHINGTON

State  
DC

Zip Code  
20005-2000

FEC ID number of contributing  
federal political committee.

**C** C00113753

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11C.176488

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MOLINA HEALTHCARE INC PAC**

Mailing Address 200 OCEANGATE  
SUITE 100

City  
LONG BEACH

State  
CA

Zip Code  
90802-4317

FEC ID number of contributing  
federal political committee.

**C** C00430256

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11C.176527

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS POLITICAL ACTI**

Mailing Address 7735 OLD GEORGETOWN RD  
SUITE 900

City  
BETHESDA

State  
MD

Zip Code  
20814-6230

FEC ID number of contributing  
federal political committee.

**C** C00300525

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 12 / 2019

Transaction ID : SA11C.176475

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

2500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 27

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

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NAME OF COMMITTEE (In Full)  
**RON JOHNSON FOR SENATE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS POLITICAL ACTI**

Mailing Address 7735 OLD GEORGETOWN RD  
SUITE 900

City BETHESDA	State MD	Zip Code 20814-6230
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00300525

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11C.176524

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**T-MOBILE PAC**

Mailing Address 401 NINTH ST NW  
SUITE 550

City WASHINGTON	State DC	Zip Code 20004-2141
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 12 / 2019

Transaction ID : SA11C.176474

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TEVA PHARMACEUTICALS USA INC. POLITICAL ACTION COM**

Mailing Address 901 NEW YORK AVENUE, NW  
5TH FLOOR EAST

City WASHINGTON	State DC	Zip Code 20001-4432
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00434811

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11C.176526

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

4000.00
18000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 ☒ 15

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NAME OF COMMITTEE (In Full)  
**RON JOHNSON FOR SENATE, INC.**

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

Mailing Address POST OFFICE BOX 262

City DUBLIN	State NH	Zip Code 03444
----------------	-------------	-------------------

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

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

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
18337.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 09 2019

Transaction ID : SA15.10392

Amount of Each Receipt this Period

689.09

☐ Memo Item

LIST RENTAL

FAIR MARKET VALUE

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

Mailing Address POST OFFICE BOX 262

City DUBLIN	State NH	Zip Code 03444
----------------	-------------	-------------------

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

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

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
18337.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 12 2019

Transaction ID : SA15.10393

Amount of Each Receipt this Period

84.10

☐ Memo Item

LIST RENTAL

FAIR MARKET VALUE

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

773.19

773.19

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. BLANDO, ANTHONY, , ,**Mailing Address 424 EAST CAPITOL STREET NE  
UNIT 7City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
STRATEGY & FUNDRAISING CONSULTING/TRAVEL REIMBURSEMENT:  
SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

11605.66

Transaction ID : SB17.I10394

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ENTERPRISE**

Mailing Address 5300 S HOWELL AVE

City  
MILWAUKEEState  
WIZip Code  
53207-4108Purpose of Disbursement  
TRAVEL: CAR RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

85.44

Transaction ID : SB17.I10418

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ENTERPRISE**

Mailing Address 5300 S HOWELL AVE

City  
MILWAUKEEState  
WIZip Code  
53207-4108Purpose of Disbursement  
TRAVEL: CAR RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

343.39

Transaction ID : SB17.I10421

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11605.66

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. HOTEL METRO**

Mailing Address 411 EAST MASON STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2019

City  
MILWAUKEEState  
WIZip Code  
53202Purpose of Disbursement  
TRAVEL: LODGING

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

444.05
--------

Transaction ID : SB17.I10423

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2019

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL: AIR

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

223.98
--------

Transaction ID : SB17.I10416

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2019

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL: AIR

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

351.48
--------

Transaction ID : SB17.I10417

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00
------

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

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

283.99

Transaction ID : SB17.I10420

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

151.98

Transaction ID : SB17.I10422

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
4TH FLCity  
SAN FRANCISCOState  
CAZip Code  
64103Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

20.07

Transaction ID : SB17.I10419

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. BLANDO, ANTHONY, , ,**Mailing Address 424 EAST CAPITOL STREET NE  
UNIT 7City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		30		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

330.38

Transaction ID : SB17.I10395

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**Mailing Address 1455 MARKET ST  
4TH FLCity  
SAN FRANCISCOState  
CAZip Code  
64103Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

12.72

Transaction ID : SB17.I10424

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GULA GRAHAM**Mailing Address 499 S CAPITOL ST SW  
SUITE 420City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING CONSULTING & EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		30		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

6518.66

Transaction ID : SB17.I10397

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6849.04

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



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. RED CURVE SOLUTIONS**Mailing Address 138 CONANT STREET  
2ND FLOORCity  
BEVERLYState  
MAZip Code  
01915Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	30	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.I10398

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
#400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

71.00

Transaction ID : SB17.I10400

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
#400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	24	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

7.10

Transaction ID : SB17.I10401

☐ Memo Item

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

3078.10

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
#400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

17.51

Transaction ID : SB17.I10402

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
#400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

17.75

Transaction ID : SB17.I10403

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
#400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

7.10

Transaction ID : SB17.I10404

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

42.36

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY**Mailing Address 1033 N FAIRFAX ST  
#400City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

7.10

Transaction ID : SB17.I10405

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. U.S. BANK**

Mailing Address 111 N MAIN STREET

City  
OSHKOSHState  
WIZip Code  
54901-4812Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : SB17.I10406

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. U.S. BANK**

Mailing Address 111 N MAIN STREET

City  
OSHKOSHState  
WIZip Code  
54901-4812Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : SB17.I10407

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

22.10

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. U.S. BANK**

Mailing Address 111 N MAIN STREET

City  
OSHKOSHState  
WIZip Code  
54901-4812Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

7.50

Transaction ID : SB17.I10408

☐ Memo Item**B. U.S. BANK - CREDIT CARD**

Mailing Address 111 N MAIN STREET

City  
OSHKOSHState  
WIZip Code  
54901Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

12589.10

Transaction ID : SB17.I10409

☐ Memo Item**C. U.S. BANK - CREDIT CARD**

Mailing Address 111 N MAIN STREET

City  
OSHKOSHState  
WIZip Code  
54901Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

2113.55

Transaction ID : SB17.I10410

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

14710.15

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 27

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

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

NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. U.S. BANK - CREDIT CARD**

Mailing Address 111 N MAIN STREET

City  
OSHKOSHState  
WIZip Code  
54901Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

3064.04

Transaction ID : SB17.I10411

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3064.04

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

39371.45

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 27

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

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NAME OF COMMITTEE (In Full)

RON JOHNSON FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

**A. S CORPORATION ASSOCIATION PAC (S-CORP PAC)**Mailing Address 1341 G ST NW  
SUITE 600City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB20C.I10399

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

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

2500.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 23 OF 27

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-15

RON JOHNSON FOR SENATE, INC.

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Johnson, Ron, H, Sen,

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

5171 Island View Dr

City

Oshkosh

State

WI

ZIP Code

54901-1355

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

250000.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 08 M

D 10 D

Y 2010 Y

M M

D D

Y DUE ON DEMAND Y

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.00

**TOTALS** This Period (last page in this line only).....▶

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 3)**  
**LOANS**

PAGE 24 OF 27

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L10

RON JOHNSON FOR SENATE, INC.

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Johnson, Ron, H, Sen,

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

5171 Island View Dr

City

Oshkosh

State

WI

ZIP Code

54901-1355

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

194524.88

Balance Outstanding at Close of This Period

55475.12

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 10 M /

D 20 D /

Y 2010 Y

M M /

D D /

Y DUE ON DEMAND Y

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

55475.12

**TOTALS** This Period (last page in this line only).....▶

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 3)**  
**LOANS**

PAGE 25 OF 27

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L11

RON JOHNSON FOR SENATE, INC.

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Johnson, Ron, H, Sen,

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

5171 Island View Dr

City

Oshkosh

State

WI

ZIP Code

54901-1355

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

34800.00

Balance Outstanding at Close of This Period

65200.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 09 M /

D 28 D /

Y 2012 Y

M M /

D D /

Y DUE ON DEMAND Y

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

65200.00

**TOTALS** This Period (last page in this line only).....▶

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 3)**  
**LOANS**

PAGE 26 OF 27

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.7964

RON JOHNSON FOR SENATE, INC.

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Johnson, Ron, H, Sen,

Election: 2016

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
5171 Island View Dr

City

State

ZIP Code

OSHKOSH

WI

54901-1355

☒ Personal Funds of the Candidate

Original Amount of Loan

339549.06

Cumulative Payment To Date

139773.24

Balance Outstanding at Close of This Period

199775.82

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 11 M /

D 08 D /

Y 2016 Y

M M /

D D /

Y DUE ON DEMAND Y

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

199775.82

**TOTALS** This Period (last page in this line only).....▶

320450.94

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 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 27 OF 27

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**RON JOHNSON FOR SENATE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**GULA GRAHAM**

Nature of Debt (Purpose):

**FUNDRAISING CONSULTING & EXPENSES**Mailing Address 499 S CAPITOL ST SW  
SUITE 420City  
WASHINGTONState  
DCZip Code  
20003

Outstanding Balance Beginning This Period

74.94

Transaction ID : SD.2019Q3.001

Amount Incurred This Period

6443.72

Payment This Period

6518.66

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

0.00

2) **TOTALS** This Period (last page this line number only) .....

0.00

3) **TOTAL 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) .....