

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Republican Party of Wisconsin

ADDRESS (number and street) 148 East Johnson Street
Check if different than previously reported. (ACC) Madison WI 53703

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00074450 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period [09] / [01] / [2019] through [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.
Type or Print Name of Treasurer Westrate, Brian, , ,

Signature of Treasurer Westrate, Brian, , , [Electronically Filed] Date [10] / [18] / [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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		266062.03
(b) Cash on Hand at Beginning of Reporting Period.....	388228.34	
(c) Total Receipts (from Line 19)	242401.50	1302340.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	630629.84	1568402.71
7. Total Disbursements (from Line 31).....	100228.22	1038001.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	530401.62	530401.62
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)	82719.07	

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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period: From: M M / D D / Y Y Y Y 09 / 01 / 2019 To: M M / D D / Y Y Y Y 09 / 30 / 2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	62419.62	289204.62
(ii) Unitemized	35167.50	410499.16
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	97587.12	699703.78
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	40316.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	97587.12	740019.78
12. Transfers From Affiliated/Other Party Committees.....	121837.00	227939.75
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).....	2829.70	10820.30
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	3250.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	20147.68	320310.85
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	20147.68	320310.85
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	242401.50	1302340.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	222253.82	982029.83

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	8276.92	120741.01
(ii) Non-Federal Share.....	21283.46	310476.90
(b) Other Federal Operating Expenditures	26034.67	333024.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	55595.05	764242.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	65.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	9250.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	9315.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	4500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	44633.17	259943.70
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	44633.17	259943.70
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	100228.22	1038001.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78944.76	727524.19

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	97587.12	740019.78
34. Total Contribution Refunds (from Line 28(d))	0.00	9315.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	97587.12	730704.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	34311.59	453765.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2829.70	10820.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31481.89	442945.19

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 91
	<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

A. ARRINGTON, CHARLES, B., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 SAINT CHRISTOPHERS ROAD

City RICHMOND	State VA	Zip Code 23226-2711
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2019

Transaction ID : SA11A.1075119

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. BAINES, KEVIN, HAYS, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 457 S MARENGO AVENUE, UNIT 21

City PASADENA	State CA	Zip Code 91101-3937
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JPL	Occupation (for Individual) PERSONAL SECRETARY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID : SA11A.1075320

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BECKER, RONALD, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2855 NORTH TAYLOR DRIVE

City SHEBOYGAN	State WI	Zip Code 53083-3606
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.1075279

Amount of Each Receipt this Period
125.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 91
	<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

A. BELONGIA, RICHARD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2813 12TH STREET
 City TWO RIVERS State WI Zip Code 54241-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074796
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1962 ROBINS RUN
 City HARTFORD State WI Zip Code 53027-9026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSTOM PAK PRODUCTS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 16 / 2019
Transaction ID : SA11A.1074500
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. BOHRER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34100 SUNSET DRIVE
 City OCONOMOWOC State WI Zip Code 53066-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2019
Transaction ID : SA11A.1075009
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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

A. BOLZ, ANNE, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 W MAIN ST
 City MADISON State WI Zip Code 53703-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2019
Transaction ID : SA11A.1074394
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRECKLE, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 E ROBERTA AVENUE
 City WAUKESHA State WI Zip Code 53186-6776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAKES GAS COMPANY Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074697
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRYDEN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 WEST 67TH STREET
 City NEW YORK State NY Zip Code 10023-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 24 / 2019
Transaction ID : SA11A.1075061
 Amount of Each Receipt this Period 205.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	505.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 91
<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

A. CLAIRBORNE, WALTER, H., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14217 CLAIRBORNE ROAD
 City BATCHELOR State LA Zip Code 70715-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 24 / 2019
Transaction ID : SA11A.1075058
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. CUSHINERY, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4582 S AHMEDI AVE
 City SAINT FRANCIS State WI Zip Code 53235-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 06 / 2019
Transaction ID : SA11A.1074281
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. DARROW, RUSS, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4664 CEDAR PARK DRIVE
 City WEST BEND State WI Zip Code 53095-9147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUSS DARROW GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2019
Transaction ID : SA11A.1074937
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 91
	<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. DYKEMA, JOHN, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3738 SCHMIDT ROAD

City DE PERE	State WI	Zip Code 54115-9764
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SASIB PACKAGING	Occupation (for Individual) LOBBYIST
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2019

Transaction ID : SA11A.1074543

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. ELLIS, JOSEPH, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3205 N MARIETTA AVENUE, APT. B

City MILWAUKEE	State WI	Zip Code 53211-3133
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2019

Transaction ID : SA11A.1074936

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. FALL, JOSEPH, H., MR., IV
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3716 TREMONT COURT

City MEQUON	State WI	Zip Code 53092-6306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESTAURANTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2019

Transaction ID : SA11A.1074508

Amount of Each Receipt this Period
225.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 91
	<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. FEDLER, RONALD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3291 HUNTER HOLLOW ROAD
 City DODGEVILLE State WI Zip Code 53533-8839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDLEAF REALTY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 12 / 2019
Transaction ID : SA11A.1074433
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. FLADER, WILLIAM, A., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 FULLER DRIVE
 City MADISON State WI Zip Code 53704-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 10 / 2019
Transaction ID : SA11A.1074384
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FLADER, WILLIAM, A., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 FULLER DRIVE
 City MADISON State WI Zip Code 53704-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074812
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 91
	<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. GEBHARD, THOMAS, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19480 W GREENFIELD AVENUE

City BROOKFIELD State WI Zip Code 53045-3857

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

Name of Employer (for Individual) ABBOTT MANAGEMENT Occupation (for Individual) REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2019
Transaction ID : SA11A.1074216

Amount of Each Receipt this Period 300.00

Memo Item CONTRIBUTION

B. GIALAMAS, GEORGE, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8040 EXCELSIOR DRIVE, SUITE 200

City MADISON State WI Zip Code 53717-1338

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

Name of Employer (for Individual) THE GIALAMAS COMPANY, INC Occupation (for Individual) BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 12 / 2019
Transaction ID : SA11A.1074435

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

C. GILOMEN, MICHAEL, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 564

City LAND O LAKES State WI Zip Code 54540-0564

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074662

Amount of Each Receipt this Period 115.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5415.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 91
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. GLENN, WILLIAM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5387 SHEARWATER DRIVE
 City SANIBEL State FL Zip Code 33957-2328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2019
Transaction ID : SA11A.1074625
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

B. GUMZ, VERN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 - 10TH STREET SOUTH
 City WISCONSIN RAPIDS State WI Zip Code 54494-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2019
Transaction ID : SA11A.1074653
 Amount of Each Receipt this Period
 120.00
 Memo Item
CONTRIBUTION

C. HANRAHAN, PHILLIP, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6031 N LAKE DRIVE
 City MILWAUKEE State WI Zip Code 53217-4647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2019
Transaction ID : SA11A.1074532
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 91
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. HARTUNG, STEVEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 S SPRINGDALE ROAD
 City WAUKESHA State WI Zip Code 53186-5364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERETT SMITH GROUP LTD. Occupation (for Individual) CORPORATE CHIEF LEGAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2019
Transaction ID : SA11A.1075189
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HAWKINS, STEPHEN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5529 DIAMOND HEIGHTS BOULEVARD
 City SAN FRANCISCO State CA Zip Code 94131-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2019
Transaction ID : SA11A.1075179
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HEIDE, CHARLES, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5825 6TH PLACE
 City KENOSHA State WI Zip Code 53144-7216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074754
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. HEISE, BARRETT, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9746 GEORGETOWNE DR.
 City HIGHLAND State IN Zip Code 46322-3420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074849
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HUME, GRAHAM, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 ELM GROVE ROAD
 City ELM GROVE State WI Zip Code 53122-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074814
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. JANDT, JUDITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10285 ANDREWS LANE
 City POUND State WI Zip Code 54161-8651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2019
Transaction ID : SA11A.1075214
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 91
	<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. JASCHINSKI, JEFFREY, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 533 HARPER DRIVE

City VERONA	State WI	Zip Code 53593-1726
----------------	-------------	------------------------

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

Name of Employer (for Individual) ENCORE HOMES, INC.	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2019

Transaction ID : SA11A.1074167

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. KELLER, ROBERT, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7310 LONGMEADOW ROAD

City MADISON	State WI	Zip Code 53717-1065
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2019

Transaction ID : SA11A.1074434

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. KENYON, DAVID, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 205

City OAKFIELD	State WI	Zip Code 53065-0205
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2019

Transaction ID : SA11A.1074380

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 91
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. KENYON, DAVID, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 205
 City OAKFIELD State WI Zip Code 53065-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074820
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. KING, WALTER, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1105 - 26 3/4 AVENUE
 City CUMBERLAND State WI Zip Code 54829-9674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074650
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. KNOX, BRIAN, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 MILWAUKEE AVENUE E
 City FORT ATKINSON State WI Zip Code 53538-2347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W D HOARD AND SONS COMPANY Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2019
Transaction ID : SA11A.1074487
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1115.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 91
<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

A. KRAVIK, MARK, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 280TH STREET
 City OSCEOLA State WI Zip Code 54020-4018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11A.1075289
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KVETON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3907 EAST DALE AVENUE
 City CUDAHY State WI Zip Code 53110-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074740
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LARSON, THOMAS, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 647 COBBLESTONE COURT
 City HUDSON State WI Zip Code 54016-7070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 11 / 2019
Transaction ID : SA11A.1074428
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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

A. LEE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3086 KETTLE MORaine ROAD
 City HARTFORD State WI Zip Code 53027-9516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE PRECISION, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2019
Transaction ID : SA11A.1075008
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. LEVIN, HERBERT, ALAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 EAST GRINNELL DRIVE
 City BURBANK State CA Zip Code 91501-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 24 / 2019
Transaction ID : SA11A.1075062
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. LEWIS, GEORGE, RAY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 PRINCETON AVENUE
 City DALLAS State TX Zip Code 75205-3249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE LEWIS INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 03 / 2019
Transaction ID : SA11A.1074154
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 91
	<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. LIESKE, ETHEL, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 534 S. MARGARET ST
 City MARKESAN State WI Zip Code 53946-7140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 16 / 2019
Transaction ID : SA11A.1074513
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LUTZOW, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4444 NORTH 110TH STREET
 City WAUWATOSA State WI Zip Code 53225-4408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICARE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2019
Transaction ID : SA11A.1074362
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. MACK, JOHN, M., , DR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18685 ELM TERRACE DRIVE
 City BROOKFIELD State WI Zip Code 53045-4912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11A.1075311
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 91
	<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. MACK, MICHAEL, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 SHERMAN AVENUE E
 City FORT ATKINSON State WI Zip Code 53538-1959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074803
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MAHONEY, P. , MICHAEL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9731 N HILLTOP LANE
 City MEQUON State WI Zip Code 53092-5319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKMANAGERS CORP. Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11A.1075318
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MANSUR, JOSEPH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6224 LYNN WAY
 City WOODBURY State MN Zip Code 55129-8401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2019
Transaction ID : SA11A.1074179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. MARX, RICHARD, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 440

City WAPPINGERS FALLS	State NY	Zip Code 12590-0440
--------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2019

Transaction ID : SA11A.1075101

Amount of Each Receipt this Period
105.00

Memo Item
CONTRIBUTION

B. MATHEWS, DAVID, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N51W27666 N WILLOW CREEK DRIVE

City PEWAUKEE	State WI	Zip Code 53072-1018
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2019

Transaction ID : SA11A.1074681

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MCKISSACK, DOUGLAS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BITTERROOT LANE

City SAVANNAH	State GA	Zip Code 31419-9507
------------------	-------------	------------------------

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

Name of Employer (for Individual) GULFSTREAM AEROSPACE	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2019

Transaction ID : SA11A.1075284

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 91
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. MILLER, TODD, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2025 HIGHLAND COURT

City SLINGER	State WI	Zip Code 53086-9468
-----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 26 / 2019
Transaction ID : SA11A.1075210

Amount of Each Receipt this Period
85.00

Memo Item
CONTRIBUTION

B. MUELLER, BETH, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7585 BLUE LAKE ISLAND ROAD

City MINOCQUA	State WI	Zip Code 54548-9538
------------------	-------------	------------------------

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

Name of Employer (for Individual) FRED MUELLER AUTOMOTIVE	Occupation (for Individual) SECRETARY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 16 / 2019
Transaction ID : SA11A.1074524

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MUELLER, BETH, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7585 BLUE LAKE ISLAND ROAD

City MINOCQUA	State WI	Zip Code 54548-9538
------------------	-------------	------------------------

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

Name of Employer (for Individual) FRED MUELLER AUTOMOTIVE	Occupation (for Individual) SECRETARY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 30 / 2019
Transaction ID : SA11A.1075290

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. NEUMANN, DAVID, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 859 N HIGH POINT ROAD
 City MADISON State WI Zip Code 53717-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2019
Transaction ID : SA11A.1074891
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OLBINSKI, KAREN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 SAINT JAMES STREET
 City MUKWONAGO State WI Zip Code 53149-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074677
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77W22240 WOODED HILLS DRIVE
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 17 / 2019
Transaction ID : SA11A.1074686
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 91
<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

A. REINHART, JOHN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 LOSEY COURT LANE
 City LA CROSSE State WI Zip Code 54601-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REINHART REAL ESTATE GROUP, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 16 / 2019
Transaction ID : SA11A.1074528
 Amount of Each Receipt this Period 750.00
 Memo Item
CONTRIBUTION

B. SCHACHTNER, HAROLD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 568 232ND AVENUE
 City SOMERSET State WI Zip Code 54025-7330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2019
Transaction ID : SA11A.1074965
 Amount of Each Receipt this Period 150.00
 Memo Item
CONTRIBUTION

C. SCHMIDT, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N9827 WHIPOORWIL DR
 City BIRNAMWOOD State MI Zip Code 54414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt 09 / 01 / 2019
Transaction ID : 101819B
 Amount of Each Receipt this Period 0.00
 Memo Item
BEST EFFORTS: EMPLOYMENT INFO

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 91
	<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. SCHUH, KONYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2365 N. PARKER DR.
 City JANESVILLE State WI Zip Code 53545-0715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENDRICKS COMMERCIAL PROPERTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2019
Transaction ID : SA11A.1075055
 Amount of Each Receipt this Period
 9750.00
 Memo Item
 CONTRIBUTION

B. SCOTT, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 66
 City LAKE DELTON State WI Zip Code 53940-0066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTT CONSTRUCTION, INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2019
Transaction ID : SA11A.1074366
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SPIVEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 HOFFMAN ROAD # 332
 City GREEN BAY State WI Zip Code 54311-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2019
Transaction ID : SA11A.1074778
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 91
	<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

A. STOLZ, RICHARD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1648 TWIN LAKES CIRCLE
 City GREEN BAY State WI Zip Code 54311-5671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 24 / 2019
Transaction ID : SA11A.1075086
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. STUBBS, YVONNE, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13490 WEST EDGEWOOD AVENUE
 City NEW BERLIN State WI Zip Code 53151-8771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGHLAND PARK FAMILY DENTISTRY Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.1075229
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SULLIVAN, DENNIS, M., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9315 N VALLEY HILL ROAD
 City RIVER HILLS State WI Zip Code 53217-1036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2019
Transaction ID : SA11A.1074848
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 91
	<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. TOENJES, WAYNE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232324 FLINTS RD
 City WAUSAU State WI Zip Code 54401-4583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAJOR INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2019
Transaction ID : SA11A.1074173
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TRONNIER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 CORYDON ROAD
 City EAU CLAIRE State WI Zip Code 54701-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2019
Transaction ID : SA11A.1075141
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. WALZ, RICHARD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W4898 N KINNEY COULEE ROAD
 City ONALASKA State WI Zip Code 54650-8850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2019
Transaction ID : SA11A.1075190
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 91
<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

A. YALURIS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2339 ALBANS RD.
 City HOUSTON State TX Zip Code 77005-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALBEMARCE CORP Occupation (for Individual) CHEMICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 23 / 2019
Transaction ID : SA11A.1075011
 Amount of Each Receipt this Period 115.00
 Memo Item CONTRIBUTION

B. ZAUG, JERRY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 317
 City SISTER BAY State WI Zip Code 54234-0317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRY HOUSE RESORT Occupation (for Individual) RESORT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2019
Transaction ID : SA11A.1074867
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. ZORE, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 W DEAN ROAD
 City RIVER HILLS State WI Zip Code 53217-2010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 23 / 2019
Transaction ID : SA11A.1075007
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5415.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 91
	<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

A. ZUBE, ZEVI AH, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 CEDAR RIDGE DRIVE S 301

City WEST BEND	State WI	Zip Code 53095-3667
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.1075277

Amount of Each Receipt this Period
60.00

Memo Item
CONTRIBUTION

B. WALKER GROUP LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 510434

City MILWAUKEE	State WI	Zip Code 53203-0081
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1984.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2019

Transaction ID : SA11A.1076023

Amount of Each Receipt this Period
1984.62

Memo Item
CONTRIBUTION

IN-KIND: FLIGHTS; SEE ATTRIBUTION BELOW

C. WALKER, SCOTT, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 510434

City MILWAUKEE	State WI	Zip Code 53203-0081
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WALKER GROUP LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1984.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2019

Transaction ID : SA11A.1076024

Amount of Each Receipt this Period
1984.62

Memo Item
CONTRIBUTION

IN-KIND: FLIGHTS; PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2044.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 91
	<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. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 WILSON BOULEVARD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3203.00

Date of Receipt
09 / 08 / 2019
Transaction ID : SA11C.10760301118

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. PARKS, RICK, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1941 FRONTIER COURT

City WEST BEND State WI Zip Code 53095-9766

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

Name of Employer (for Individual) Occupation (for Individual)
SOCIETY INSURANCE INSURANCE EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 04 / 2019
Transaction ID : SA11A.1076094

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 WILSON BOULEVARD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3203.00

Date of Receipt
09 / 10 / 2019
Transaction ID : SA11C.10760331126

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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

A. BELANGER, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6101 OAKLAND HILLS ROAD
 City NASHOTAH State WI Zip Code 53058-9731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2019
Transaction ID : SA11A.1076089
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 WILSON BOULEVARD SUITE 530
 City ARLINGTON State VA Zip Code 22209-2515
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3203.00

Date of Receipt 09 / 12 / 2019
Transaction ID : SA11C.10760351131
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. HAUBRICH, CHARLES, OSCAR, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33343 ACADEMY RD
 City BURLINGTON State WI Zip Code 53105-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2019
Transaction ID : SA11A.1076086
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 91
	<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. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 WILSON BOULEVARD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3203.00

Date of Receipt
09 / 22 / 2019
Transaction ID : SA11C.10760421153

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. BALLERINI, FREDERICK P, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W207 N17413 PARKVIEW DRIVE

City JACKSON State WI Zip Code 53037-9813

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

Name of Employer (for Individual) Occupation (for Individual)
DENTAQUEST DENTAL CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
09 / 19 / 2019
Transaction ID : SA11A.1076071

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 WILSON BOULEVARD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3203.00

Date of Receipt
09 / 22 / 2019
Transaction ID : SA11C.10760421156

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 34 OF 91
(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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HALLA, LARRY, D., ,

Mailing Address **1011 LILAC LN**

City PEWAUKEE	State WI	Zip Code 53072-3718
-------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
09 / 19 / 2019

Transaction ID : SA11A.1076074

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	62419.62

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 91
<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

A. TAKE BACK THE HOUSE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 30844

City BETHESDA	State MD	Zip Code 20824-0844
FEC ID number of contributing federal political committee. C C00695585		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 133191.56

Date of Receipt
MM / DD / YYYY
09 / 30 / 2019
Transaction ID : SA12.1076231

Amount of Each Receipt this Period
68407.00

Memo Item
TRANSFER
TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. ANSARY, HUSHANG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 LOUISIANA ST SUITE 5900

City HOUSTON	State TX	Zip Code 77002-5014
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PARMAN CAPITAL GROUP		Occupation (for Individual) EXECUTIVE CHAIRMAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2019
Transaction ID : SA12.1076246

Amount of Each Receipt this Period
10000.00

Memo Item
TRANSFER
JFC ATTRIB: TAKE BACK THE HOUSE

C. BUCKLEY, WALTER, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11450 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-3343
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2019
Transaction ID : SA12.1076238

Amount of Each Receipt this Period
5500.00

Memo Item
TRANSFER
JFC ATTRIB: TAKE BACK THE HOUSE

SUBTOTAL of Receipts This Page (optional).....	68407.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 91
<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

A. BUCKLEY, WALTER, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11450 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-3343
--------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2019

Transaction ID : SA12.1076239

Amount of Each Receipt this Period
4500.00

Memo Item
TRANSFER

JFC ATTRIB: TAKE BACK THE HOUSE

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

Mailing Address 165 SAGO PALM ROAD

City VERO BEACH	State FL	Zip Code 32963-3702
--------------------	-------------	------------------------

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

Name of Employer (for Individual) J.W. CHILDS ASSOCIATES	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4469.65

Date of Receipt

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

Transaction ID : SA12.1076237

Amount of Each Receipt this Period
4469.65

Memo Item
TRANSFER

JFC ATTRIB: TAKE BACK THE HOUSE

C. ESTEY, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3051 ARABIAN ROAD

City LAS VEGAS	State NV	Zip Code 89107-4540
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NEVADA RESTAURANT SERVICES	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2019

Transaction ID : SA12.1076242

Amount of Each Receipt this Period
10000.00

Memo Item
TRANSFER

JFC ATTRIB: TAKE BACK THE HOUSE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 91
<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

A. FOSTER, PAUL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 84
 City WISCASSET State ME Zip Code 04578-0084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKLIN MOUNTAIN MANAGEMENT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **06 / 25 / 2019**
Transaction ID : SA12.1076245
 Amount of Each Receipt this Period 10000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

B. GARATONI, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 EDISON LAKES PKWY
 City MISHAWAKA State IN Zip Code 46545-3465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARATONI FAMILY FOUNDATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2695.00

Date of Receipt **09 / 30 / 2019**
Transaction ID : SA12.1076236
 Amount of Each Receipt this Period 2695.00
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

C. GOE, SOUL-SUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 N STONE ROAD
 City SNOWVILLE State UT Zip Code 84336-4527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OCEAN STAR INTERNATIONAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 195.00

Date of Receipt **09 / 17 / 2019**
Transaction ID : SA12.1076232
 Amount of Each Receipt this Period 195.00
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 91
<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

A. JOHNSON, CHARLES, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 SOUTH OCEAN BLVD
 City PALM BEACH State FL Zip Code 33480-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6023.52

Date of Receipt 06 / 27 / 2019
Transaction ID : SA12.1076240
 Amount of Each Receipt this Period 6023.52
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

B. KENT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908001
 City MIDLAND State TX Zip Code 79708-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE KENT COMPANIES Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 26 / 2019
Transaction ID : SA12.1076234
 Amount of Each Receipt this Period 1250.00
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

C. LUCCHETTI, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9300 DILLARD ROAD
 City WILTON State CA Zip Code 95693-9461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC COAST COMPANIES Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 195.00

Date of Receipt 09 / 26 / 2019
Transaction ID : SA12.1076233
 Amount of Each Receipt this Period 195.00
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 91
<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

A. MARCUS, BERNARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1266 WEST PACES FERRY ROAD #615

City ATLANTA	State GA	Zip Code 30327-2306
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2019

Transaction ID : SA12.1076243

Amount of Each Receipt this Period
10000.00

Memo Item
TRANSFER

JFC ATTRIB: TAKE BACK THE HOUSE

B. MARCUS, BILLI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1266 W PACES FERRY ROAD NW #615

City ATLANTA	State GA	Zip Code 30327-2306
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2019

Transaction ID : SA12.1076244

Amount of Each Receipt this Period
10000.00

Memo Item
TRANSFER

JFC ATTRIB: TAKE BACK THE HOUSE

C. PEED, THOMAS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 82545

City LINCOLN	State NE	Zip Code 68501-2545
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SANDHILLS PUBLISHING	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6970.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2019

Transaction ID : SA12.1076241

Amount of Each Receipt this Period
6970.00

Memo Item
TRANSFER

JFC ATTRIB: TAKE BACK THE HOUSE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 91
<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

A. SINQUEFIELD, REX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 6TH STREET NW
 City WASHINGTON State DC Zip Code 20001-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHOW ME INSTITUTE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1835.30

Date of Receipt 09 / 30 / 2019
Transaction ID : SA12.1076235
 Amount of Each Receipt this Period 1835.30
 Memo Item
 TRANSFER
 JFC ATTRIB: TAKE BACK THE HOUSE

B. REPUBLICAN NATIONAL COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 1ST ST SE
 City WASHINGTON State DC Zip Code 20003-1885
 FEC ID number of contributing federal political committee. **C** C00003418
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 91110.00

Date of Receipt 09 / 15 / 2019
Transaction ID : SA11B.1074544
 Amount of Each Receipt this Period 7480.00
 Memo Item
 TRANSFER

C. REPUBLICAN NATIONAL COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 1ST ST SE
 City WASHINGTON State DC Zip Code 20003-1885
 FEC ID number of contributing federal political committee. **C** C00003418
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 91110.00

Date of Receipt 09 / 30 / 2019
Transaction ID : SA11B.1075468
 Amount of Each Receipt this Period 45950.00
 Memo Item
 TRANSFER

SUBTOTAL of Receipts This Page (optional).....	53430.00
TOTAL This Period (last page this line number only).....	121837.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 91
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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. PITNEY BOWES GLOBAL FINANCIAL SERVICES
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 371887

City PITTSBURGH	State PA	Zip Code 15250
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 804.70

Date of Receipt
09 / 06 / 2019
Transaction ID : SA15.30284

Amount of Each Receipt this Period
804.70

Memo Item
REFUND

B. REPUBLICAN PARTY OF SHAWANO COUNTY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 12

City SHAWANO	State WI	Zip Code 54166-0012
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 367.50

Date of Receipt
09 / 20 / 2019
Transaction ID : SA11C.1074949

Amount of Each Receipt this Period
262.50

Memo Item
YARD SIGN REIMBURSEMENT

C. REPUBLICAN PARTY OF KEWAUNEE COUNTY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address E3530 TOWNLINE ROAD

City KEWAUNEE	State WI	Zip Code 54216-9659
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 315.00

Date of Receipt
09 / 20 / 2019
Transaction ID : SA11C.1074951

Amount of Each Receipt this Period
315.00

Memo Item
YARD SIGN REIMBURSEMENT

SUBTOTAL of Receipts This Page (optional).....	1382.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 91
<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. REPUBLICAN PARTY OF SHAWANO COUNTY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 12

City SHAWANO	State WI	Zip Code 54166-0012
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
367.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2019

Transaction ID : SA11C.1074953

Amount of Each Receipt this Period
105.00

Memo Item
YARD SIGN REIMBURSEMENT

B. REPUBLICAN PARTY OF BROWN COUNTY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 5202

City DE PERE	State WI	Zip Code 54115-5202
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2019

Transaction ID : SA11C.1074955

Amount of Each Receipt this Period
315.00

Memo Item
YARD SIGN REIMBURSEMENT

C. REPUBLICAN PARTY OF JACKSON COUNTY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 355

City BLACK RIVER FALLS	State WI	Zip Code 54615-0355
---------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID : SA11B.1075295

Amount of Each Receipt this Period
300.00

Memo Item
YARD SIGN REIMBURSEMENT

SUBTOTAL of Receipts This Page (optional).....	720.00
TOTAL This Period (last page this line number only).....	2102.20

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ALLEGRA

Mailing Address 2 E MIFFLIN STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PRINTING - NOT FEA

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.I3040
Amount of Each Disbursement this Period
[] 388.74 []

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address P.O. BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.I3040
Amount of Each Disbursement this Period
[] 301.95 []

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address P.O. BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.I3040
Amount of Each Disbursement this Period
[] 232.96 []

Memo Item

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

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

9	2	3	.	6	5
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BMO HARRIS BANK

Mailing Address P.O. BOX 5700

City
CAROL STREAM

State
IL

Zip Code
60197

Purpose of Disbursement
CREDIT CARD PAYMENT

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
0	9		2	6		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3041I

Amount of Each Disbursement this Period

[REDACTED] 29.19

Memo Item

Full Name (Last, First, Middle Initial)

B. LEADERSHIP INSTITUTE

Mailing Address 1101 N. HIGHLAND ST.

City
ARLINGTON

State
VA

Zip Code
22201

Purpose of Disbursement
STAFF TRAINING

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
0	8		1	5		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3050I

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. REPUBLICAN NATIONAL COMMITTEE

Mailing Address RNC- OPERATING
310 FIRST ST. SE

City
WASHINGTON

State
DC

Zip Code
20003-1885

Purpose of Disbursement
REFUND

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
0	8		2	0		2	0	1	9

FEC Identification Number

C C00003418

Transaction ID : SB21B.I3050I

Amount of Each Disbursement this Period

[REDACTED] - 368.69

Memo Item

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

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

[REDACTED] 29.19

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3050
Amount of Each Disbursement this Period
84.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3050
Amount of Each Disbursement this Period
14.88

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3050
Amount of Each Disbursement this Period
49.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BMO HARRIS BANK

Mailing Address 1 W MAIN ST

City MADISON State WI Zip Code 53703

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I3044
Amount of Each Disbursement this Period

131.09

Memo Item

Full Name (Last, First, Middle Initial)

B. DAN MORSE CONSULTING LLC

Mailing Address 5205 BARTON ROAD

City MADISON State WI Zip Code 53711

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I3041
Amount of Each Disbursement this Period

840.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EASY PERMIT POSTAGE PITNEY BOWES

Mailing Address P.O. BOX 371874

City PITTSBURGH State PA Zip Code 15250

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I3041
Amount of Each Disbursement this Period

949.29

Memo Item

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

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

1920.38

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ISTREAM

Mailing Address 13555 BISHOPS CT, STE 102

City **BROOKFIELD** State **WI** Zip Code **53005**

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3041:
Amount of Each Disbursement this Period
 155.64

Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST PUBLISHING & MAILING CORP

Mailing Address 4000 SE ADAMS STREET

City **TOPEKA** State **KS** Zip Code **66609-1160**

Purpose of Disbursement
DIRECT MAIL - NOT FEA

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3041:
Amount of Each Disbursement this Period
 8447.30

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST PUBLISHING & MAILING CORP

Mailing Address 4000 SE ADAMS STREET

City **TOPEKA** State **KS** Zip Code **66609-1160**

Purpose of Disbursement
DIRECT MAIL - NOT FEA

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3041:
Amount of Each Disbursement this Period
 5805.90

Memo Item

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

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

14408.84

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. STEVE BROWN DM

Mailing Address 3864 W MILLERS BRIDGE ROAD

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3041i
Amount of Each Disbursement this Period
2062.58

Memo Item

Full Name (Last, First, Middle Initial)

B. STEVE BROWN DM

Mailing Address 3864 W MILLERS BRIDGE ROAD

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3041i
Amount of Each Disbursement this Period
1790.36

Memo Item

Full Name (Last, First, Middle Initial)

C. THE MONACO GROUP

Mailing Address 1011 S LINWOOD AVENUE

City SANTA ANA State CA Zip Code 92705

Purpose of Disbursement
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3041i
Amount of Each Disbursement this Period
1817.67

Memo Item

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

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

5670.61

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. WALKER GROUP LLC		Date of Disbursement MM / DD / YYYY 09 / 01 / 2019	
Mailing Address PO BOX 510434		FEC Identification Number C [REDACTED]	
City MILWAUKEE	State WI	Zip Code 53203-0081	Transaction ID : SB21B.10760
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type	Amount of Each Disbursement this Period 1984.62
Candidate Name			<input type="checkbox"/> Memo Item
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) ▼		IN-KIND: FLIGHTS
State: District:			

Full Name (Last, First, Middle Initial) B. WEST ALLIS BLUE		Date of Disbursement MM / DD / YYYY 09 / 12 / 2019	
Mailing Address 2063 S. 116TH STREET		FEC Identification Number C [REDACTED]	
City WEST ALLIS	State WI	Zip Code 53227	Transaction ID : SB21B.I3042c
Purpose of Disbursement PRINTING - NOT FEA		Category/ Type	Amount of Each Disbursement this Period 754.91
Candidate Name			<input type="checkbox"/> Memo Item
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. WINRED		Date of Disbursement MM / DD / YYYY 09 / 08 / 2019	
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22209	Transaction ID : SB21B.I3042
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type	Amount of Each Disbursement this Period 19.30
Candidate Name			<input type="checkbox"/> Memo Item
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)..... ▶

2758.83

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3042
Amount of Each Disbursement this Period
14.18

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3042
Amount of Each Disbursement this Period
12.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3042
Amount of Each Disbursement this Period
11.70

Memo Item

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

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

37.88

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3042f
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3042f
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3042f
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3042
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3042
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

2.20

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

2.20

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period

2.20

Memo Item

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

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

6.60

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period
2.20

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 19 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period
2.12

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 24 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I3043
Amount of Each Disbursement this Period
1.93

Memo Item

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

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

6.25

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2019

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

FEC Identification Number

C []

Transaction ID : SB21B.I30441
Amount of Each Disbursement this Period

[] 1.36

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

FEC Identification Number

C []

Transaction ID : SB21B.I30441
Amount of Each Disbursement this Period

[] 1.25

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2019

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

FEC Identification Number

C []

Transaction ID : SB21B.I30441
Amount of Each Disbursement this Period

[] 0.87

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

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

[] 3.48

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3044:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3044:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I3044:
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. WINRED

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3051

Amount of Each Disbursement this Period: 94.08

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 94.08

TOTAL This Period (last page this line number only)..... ▶ 25923.67

**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"/> 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. CALLAHAN, CALVIN, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3044 Amount of Each Disbursement this Period [] 975.69	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. CHOMOR, KESANG, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3044 Amount of Each Disbursement this Period [] 116.37	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. CHOMOR, KESANG, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3044 Amount of Each Disbursement this Period [] 66.49	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1158.55
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"/> 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. DICIAULA, CLAY, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I3045I Amount of Each Disbursement this Period [REDACTED] 1211.48	
City MADISON	State WI	Zip Code 53703	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. DICIAULA, CLAY, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I3045I Amount of Each Disbursement this Period [REDACTED] 1211.46	
City MADISON	State WI	Zip Code 53703	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. DICKIE, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I3045I Amount of Each Disbursement this Period [REDACTED] 1277.57	
City MADISON	State WI	Zip Code 53703-4620	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3700.51
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. DICKIE, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET			
City MADISON	State WI	Zip Code 53703-4620	
Purpose of Disbursement PAYROLL		<input type="checkbox"/>	FEC Identification Number C
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) ▼		Transaction ID : SB30B.I3045 Amount of Each Disbursement this Period 1216.89
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FOSTER, JOHN, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET			
City MADISON	State WI	Zip Code 53703	
Purpose of Disbursement PAYROLL		<input type="checkbox"/>	FEC Identification Number C
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) ▼		Transaction ID : SB30B.I3045 Amount of Each Disbursement this Period 804.10
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FOSTER, JOHN, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET			
City MADISON	State WI	Zip Code 53703	
Purpose of Disbursement PAYROLL		<input type="checkbox"/>	FEC Identification Number C
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) ▼		Transaction ID : SB30B.I3045 Amount of Each Disbursement this Period 697.12
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2718.11
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)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. HEIMBACH, DONNA, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C Transaction ID : SB30B.I3045I Amount of Each Disbursement this Period 560.40
City MADISON	State WI	
Purpose of Disbursement PAYROLL	Zip Code 53703-2425	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HEIMBACH, DONNA, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C Transaction ID : SB30B.I3045I Amount of Each Disbursement this Period 476.02
City MADISON	State WI	
Purpose of Disbursement PAYROLL	Zip Code 53703-2425	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HEUP, AMELIA, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C Transaction ID : SB30B.I3045I Amount of Each Disbursement this Period 1190.48
City MADISON	State WI	
Purpose of Disbursement PAYROLL	Zip Code 53703	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2226.90
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"/> 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. HEUP, AMELIA, , ,

Mailing Address C/O 148 E JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I3045!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KAPLA, PATRICK, , ,

Mailing Address C/O 148 E JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I3046
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KARST, DAVID, , ,

Mailing Address C/O 148 E JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I3046
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. LIPSKI, ROGER, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3046 Amount of Each Disbursement this Period [] 424.30
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. LIPSKI, ROGER, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3046 Amount of Each Disbursement this Period [] 301.44
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MICECH, BRANDON, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3046 Amount of Each Disbursement this Period [] 747.52
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:	<input type="checkbox"/> Memo Item	

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

1473.26

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)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. MICECH, BRANDON, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I30467 Amount of Each Disbursement this Period [] 690.82	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MICHAELIS, JAKOB, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I30467 Amount of Each Disbursement this Period [] 41.56	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. OMEJA, JACKSON, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I30467 Amount of Each Disbursement this Period [] 141.29	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 873.67
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"/> 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. OMEJA, JACKSON, , ,

Mailing Address C/O 148 E JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB30B.I3046I
 Amount of Each Disbursement this Period
 [] 128.84

Memo Item

Full Name (Last, First, Middle Initial)

B. PYLE, THOMAS, , ,

Mailing Address C/O 148 E JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	13	/	2019

FEC Identification Number

C []
Transaction ID : SB30B.I3047I
 Amount of Each Disbursement this Period
 [] 24.94

Memo Item

Full Name (Last, First, Middle Initial)

C. RETZA, RYAN, , ,

Mailing Address C/O 148 E JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	13	/	2019

FEC Identification Number

C []
Transaction ID : SB30B.I3047I
 Amount of Each Disbursement this Period
 [] 996.69

Memo Item

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

[] 1150.47

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"/> 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. RETZA, RYAN, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3047 Amount of Each Disbursement this Period 996.68	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. SCHMIDT, KATELYN, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3047 Amount of Each Disbursement this Period 1532.18	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. SCHMIDT, KATELYN, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [] Transaction ID : SB30B.I3047 Amount of Each Disbursement this Period 1532.18	
City MADISON	State WI	Zip Code 53703	Category/ Type []
Purpose of Disbursement PAYROLL		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	4061.04
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"/> 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. STOLTE, CARL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3047f

Amount of Each Disbursement this Period: 732.69

Memo Item

B. STOLTE, CARL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3047f

Amount of Each Disbursement this Period: 664.30

Memo Item

C. TRUEBLOOD, NATHANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3047f

Amount of Each Disbursement this Period: 1513.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2910.19

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)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. TRUEBLOOD, NATHANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3047

Amount of Each Disbursement this Period: 1348.38

Memo Item

B. WOJCIK, COLLIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3047

Amount of Each Disbursement this Period: 1303.14

Memo Item

C. WOJCIK, COLLIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period: 1303.14

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3954.66

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)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. ZIESMANN, COLE, , ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I3048' Amount of Each Disbursement this Period [REDACTED] 156.65	
City MADISON	State WI	Zip Code 53703	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ZIESMANN, COLE, , ,		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address C/O 148 E JOHNSON STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I30482 Amount of Each Disbursement this Period [REDACTED] 141.30	
City MADISON	State WI	Zip Code 53703	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD PAYROLL LLC		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019	
Mailing Address 140 FELL COURT		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I3048 Amount of Each Disbursement this Period [REDACTED] 4894.05	
City HAUPPAUGE	State NY	Zip Code 11788	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL TAX		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 5192.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement PAYROLL TAX

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period: 4263.69

Memo Item

Full Name (Last, First, Middle Initial)
B. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement PAYROLL TAX

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period: 89.95

Memo Item

Full Name (Last, First, Middle Initial)
C. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period: 79.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4432.64

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"/> 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. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

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

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period

[REDACTED] 79.00

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2019

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL TAX

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period

[REDACTED] 74.86

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2019

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL TAX

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3048

Amount of Each Disbursement this Period

[REDACTED] 10.83

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

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

[REDACTED] 164.69

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

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

Mailing Address 140 FELL COURT

FEC Identification Number

C []
Transaction ID : SB30B.I3049I
 Amount of Each Disbursement this Period
 [] 10.83

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL TAX

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN FUNDS SERVICE COMPANY

Date of Disbursement

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

Mailing Address BOX 6164

FEC Identification Number

C []
Transaction ID : SB30B.I3049I
 Amount of Each Disbursement this Period
 [] 1028.67

City INDIANAPOLIS State IN Zip Code 46206-6164

Purpose of Disbursement
EMPLOYEE SIMPLE IRA

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. CLS SERVICES INC

Date of Disbursement

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

Mailing Address N172 SOUTH PARK DRIVE

FEC Identification Number

C []
Transaction ID : SB30B.I3049I
 Amount of Each Disbursement this Period
 [] 3937.50

City APPLETON State WI Zip Code 54914

Purpose of Disbursement
YARD SIGNS FOR VOLUNTEER DISTRIBUTION

[]
Category/
Type

Candidate Name

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

Memo Item

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

[] 4977.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. DELTA DENTAL

Mailing Address P.O. BOX 518

City WISCONSIN RAPIDS State WI Zip Code 54495-6001

Purpose of Disbursement EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3049

Amount of Each Disbursement this Period: 194.52

Memo Item

Full Name (Last, First, Middle Initial)
B. DELTA DENTAL

Mailing Address P.O. BOX 518

City WISCONSIN RAPIDS State WI Zip Code 54495-6001

Purpose of Disbursement EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3049

Amount of Each Disbursement this Period: 17.91

Memo Item

Full Name (Last, First, Middle Initial)
C. EMPLOYEE BENEFITS CORPORATION

Mailing Address P.O. BOX 44347

City MADISON State WI Zip Code 53744-4347

Purpose of Disbursement EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB30B.I3049

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1212.43

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"/> 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. EMPLOYEE BENEFITS CORPORATION

Mailing Address P.O. BOX 44347

City MADISON State WI Zip Code 53744-4347

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: C
Transaction ID : SB30B.I30497
Amount of Each Disbursement this Period: 528.78

Memo Item

Full Name (Last, First, Middle Initial)
B. EMPLOYEE BENEFITS CORPORATION

Mailing Address P.O. BOX 44347

City MADISON State WI Zip Code 53744-4347

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C
Transaction ID : SB30B.I30497
Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. EMPLOYEE BENEFITS CORPORATION

Mailing Address P.O. BOX 44347

City MADISON State WI Zip Code 53744-4347

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 19 / 2019

FEC Identification Number: C
Transaction ID : SB30B.I30497
Amount of Each Disbursement this Period: 32.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 610.98

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"/> 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. QUARTZ

Mailing Address P.O. BOX 78730

City MILWAUKEE State WI Zip Code 53278

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3049
Amount of Each Disbursement this Period

[REDACTED] 1238.97

Memo Item

Full Name (Last, First, Middle Initial)

B. UNUM

Mailing Address P.O. BOX 409548

City ATLANTA State GA Zip Code 30384

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3050
Amount of Each Disbursement this Period

[REDACTED] 39.31

Memo Item

Full Name (Last, First, Middle Initial)

C. WISC DEPT OF REVENUE

Mailing Address P.O. BOX 930208

City MILWAUKEE State WI Zip Code 53293-0001

Purpose of Disbursement
PAYROLL GARNISHMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3050
Amount of Each Disbursement this Period

[REDACTED] 100.00

Memo Item

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

[REDACTED] 1378.28

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

[REDACTED] 44566.67

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 91
	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 ADVANTAGE DIRECT		Nature of Debt (Purpose): VOIP, LISTS & MOBILE APP DEVELOPMENT	
Mailing Address 2300 CLARENDON BLVD			
City ARLINGTON	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period <input type="text" value="60509.07"/>	Transaction ID : 031919D1_B_B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="60509.07"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor KATE LIND LEGAL LLC		Nature of Debt (Purpose): LEGAL FEES	
Mailing Address 8401 EXCELSIOR DRIVE			
City MADISON	State WI	Zip Code 53717	

Outstanding Balance Beginning This Period <input type="text" value="3000.00"/>	Transaction ID : 031919BB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MICHAEL BEST & FRIEDRICH		Nature of Debt (Purpose): LEGAL SERVICES	
Mailing Address 100 E WISCONSIN AVE			
City MILWAUKEE	State WI	Zip Code 53202	

Outstanding Balance Beginning This Period <input type="text" value="3960.00"/>	Transaction ID : 051919H	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3960.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="66469.07"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 91
	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 SCM ASSOCIATES INC.			Nature of Debt (Purpose): DIRECT MAIL - NOT FEA
Mailing Address 2383 MAIN STREET			
City DUBLIN	State NH	Zip Code 03444	

Outstanding Balance Beginning This Period 5250.00	Transaction ID : 031919D1_B_B_B_B_B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGET POINT CONSULTING			Nature of Debt (Purpose): DATA CONSULTING
Mailing Address 66 CANAL CENTER PLAZA			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 18000.00	Transaction ID : 031919D1_B_B_B_B_B	
Amount Incurred This Period 0.00	Payment This Period 7000.00	Outstanding Balance at Close of This Period 11000.00

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	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	16250.00
2) TOTALS This Period (last page this line number only)..... ▶	82719.07
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	82719.07

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)**

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

Transaction ID : 101819A

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- Presidential-Only Election Year (28% Federal)
- Presidential and Senate Election Year (36% Federal)
- Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Indicate ratio below

Federal..... %
 Nonfederal %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN NONFEDERAL ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 09 / 12 / 2019	TOTAL AMOUNT TRANSFERRED 8807.31
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	8807.31
Transaction ID : 101819R	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN NONFEDERAL ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 09 / 26 / 2019	TOTAL AMOUNT TRANSFERRED 11340.37
--	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	11340.37
Transaction ID : 101819B_B	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	20147.68
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	20147.68

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30389** Memo Item

ADESYS CONSULTING, LLC

Mailing Address 2965 CAHILL MAIN

City FITCHBURG State WI Zip Code 53711

Purpose of Disbursement: OFFICE MACHINES

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date 390784.13

Date 09 / 12 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.45		91.15		126.60

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30390** Memo Item

ADVANCED DISPOSAL - MADISON

Mailing Address P.O. BOX 74008053

City CHICAGO State IL Zip Code 60674

Purpose of Disbursement: WASTE MANAGEMENT

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date 391233.51

Date 09 / 12 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.83		323.55		449.38

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30391** Memo Item

ASPECT CONSULTING, LLC

Mailing Address P.O. BOX 620066

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement: COMPLIANCE CONSULTING

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date 396233.51

Date 09 / 12 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1400.00		3600.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1561.28		4014.70		5575.98

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: KATE LIND LEGAL, LLC. Transaction ID: SB21A.30396. Administrative activity. Total amount: 1000.00.

Form B: SHRED-IT. Transaction ID: SB21A.30401. Administrative activity. Total amount: 135.99.

Form C: WELLS FARGO VENDOR FINANCIAL SERVICE. Transaction ID: SB21A.30405. Administrative activity. Total amount: 2060.40.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 894.99, NONFEDERAL SHARE 2301.40, TOTAL AMOUNT 3196.39.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30406** Memo Item

WISPOLITICS.COM

Mailing Address 14 W MIFFLIN STREET

City MADISON State WI Zip Code 53703-2156

Purpose of Disbursement: SUBSCRIPTION

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 402889.90

Date: 09 / 12 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
968.80		2491.20		3460.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30395** Memo Item

CMDI

Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement: SOFTWARE

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 403792.40

Date: 09 / 19 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.70		649.80		902.50

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30392** Memo Item

BMO HARRIS BANK

Mailing Address P.O. BOX 5700

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement: CREDIT CARD PAYMENT

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 405898.66

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
589.75		1516.51		2106.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1811.25		4657.51		6468.76

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30393 Memo Item

CENTURY SPRINGS BOTTLING CO.

Mailing Address P.O. BOX 856858

City MINNEAPOLIS State MN Zip Code 55485

Purpose of Disbursement: OFFICE WATER

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 405951.16

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		37.80		52.50

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30394 Memo Item

CLOCKWORK SYSTEMS

Mailing Address 6001 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement: LIST RENTAL - NOT FEA

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 406626.16

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
189.00		486.00		675.00

C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30397 Memo Item

MADISON GAS AND ELECTRIC

Mailing Address P.O. BOX 1231

City MADISON State WI Zip Code 53701-1231

Purpose of Disbursement: UTILITIES

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 407420.12

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
222.31		571.65		793.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
426.01		1095.45		1521.46

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30398** Memo Item

MADISON WATER UTILITY

Mailing Address 119 EAST OLIN AVE

City MADISON	State WI	Zip Code 53713
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Purpose of Disbursement:
UTILITIES

Activity or Event Identifier:
ADMINISTRATIVE

Category/Type: 001

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 407539.51

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.43		85.96		119.39

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30399** Memo Item

PITNEY BOWES GLOBAL FINANCIAL SERVICES

Mailing Address P.O. BOX 371887

City PITTSBURGH	State PA	Zip Code 15250
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Purpose of Disbursement:
OFFICE MACHINES

Activity or Event Identifier:
ADMINISTRATIVE

Category/Type: 001

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 408344.21

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.32		579.38		804.70

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30400** Memo Item

PRO ONE JANITORIAL, INC.

Mailing Address 1101 ASHWAUBENON ST.

City GREEN BAY	State WI	Zip Code 54304-1133
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Purpose of Disbursement:
CLEANING SERVICE

Activity or Event Identifier:
ADMINISTRATIVE

Category/Type: 001

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 408939.21

Date: 09 / 26 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.60		428.40		595.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
425.35		1093.74		1519.09

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30402** Memo Item
TARGET POINT CONSULTING, INC.
Mailing Address 66 CANAL CENTER PLAZA
NO 555
City ALEXANDRIA State VA Zip Code 22314
Purpose of Disbursement: DATA CONSULTING
Activity or Event Identifier: ADMINISTRATIVE
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 415939.21
Date 09 / 26 / 2019
Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1960.00		5040.00		7000.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30403** Memo Item
TDS METROCOM
Mailing Address P.O. BOX 94510
City PALATINE State IL Zip Code 60094
Purpose of Disbursement: TELEPHONES
Activity or Event Identifier: ADMINISTRATIVE
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 418660.20
Date 09 / 26 / 2019
Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
761.88		1959.11		2720.99

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30404** Memo Item
WAUKESHA EAST COMMERCE CENTER LLC
Mailing Address 1703 PEARL STREET
City WAUKESHA State WI Zip Code 53186
Purpose of Disbursement: OFFICE RENT
Activity or Event Identifier: ADMINISTRATIVE
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 420217.91
Date 09 / 26 / 2019
Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
436.16		1121.55		1557.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3158.04		8120.66		11278.70

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30507** Memo Item

CITY OF MADISON PARKING

Mailing Address 215 MLK JR BLVD

City MADISON	State WI	Zip Code 53703
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Purpose of Disbursement:
9/26 CC Payment: PARKING

Activity or Event Identifier:
ADMINISTRATIVE

001
Category/Type

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date: 08 / 14 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.12		2.88		4.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30508** Memo Item

MICROSOFT

Mailing Address 1 MICROSOFT WAY

City REDMOND	State WA	Zip Code 98052
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Purpose of Disbursement:
9/26 CC Payment: SOFTWARE

Activity or Event Identifier:
ADMINISTRATIVE

001
Category/Type

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date: 08 / 20 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.87		220.80		306.67

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30509** Memo Item

ACTION LOCK

Mailing Address 130 STATE STREET

City MADISON	State WI	Zip Code 53703
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Purpose of Disbursement:
9/26 CC Payment: BUILDING MAINTENANCE

Activity or Event Identifier:
ADMINISTRATIVE

001
Category/Type

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date: 08 / 21 / 2019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.58		32.36		44.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30510** Memo Item
AMAZON.COM
Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement: 9/26 CC Payment:OFFICE SUPPLIES

Activity or Event Identifier: **ADMINISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 08 / 21 / 2019

Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.11		74.84		103.95

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30511** Memo Item
ADOBE SYSTEMS
Mailing Address 801 N 34TH STREET

City SEATTLE State WA Zip Code 98103

Purpose of Disbursement: 9/26 CC Payment:SOFTWARE

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 08 / 26 / 2019

Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.65		40.25		55.90

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.30512** Memo Item
MILWAUKEE JOURNAL SENTINEL
Mailing Address P.O. BOX 2929

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement: 9/26 CC Payment:SUBSCRIPTION

Activity or Event Identifier: ADMINISTRATIVE

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 09 / 02 / 2019

Category/Type 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.80		7.19		9.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30513 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
AT&T Mailing Address P.O. BOX 5014			Allocated Activity or Event Year-To-Date _____			
City CAROL STREAM	State IL	Zip Code 60507-9100	Date <input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2019"/>			
Purpose of Disbursement: 9/26 CC Payment:TELEPHONE		001	_____			
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	_____			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="12.52"/>			<input type="text" value="32.20"/>			<input type="text" value="44.72"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30514 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
CONVOSO Mailing Address 20950 WARNER CENTER LANE			Allocated Activity or Event Year-To-Date _____			
City WOODLAND HILLS	State CA	Zip Code 91367	Date <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2019"/>			
Purpose of Disbursement: 9/26 CC Payment:PREDICTIVE DIALER		001	_____			
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	_____			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="345.52"/>			<input type="text" value="888.48"/>			<input type="text" value="1234.00"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30516 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
AMAZON.COM Mailing Address 1516 2ND AVENUE			Allocated Activity or Event Year-To-Date _____			
City SEATTLE	State WA	Zip Code 98101	Date <input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2019"/>			
Purpose of Disbursement: 9/26 CC Payment:OFFICE SUPPLIES		001	_____			
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	_____			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="16.39"/>			<input type="text" value="42.14"/>			<input type="text" value="58.53"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30515 <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <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			
FEDEX Mailing Address PO BOX 1140			Allocated Activity or Event Year-To-Date _____			
City MEMPHIS	State TN	Zip Code 38101	Date <input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2019"/>			
Purpose of Disbursement: 9/26 CC Payment:SHIPPING		<input type="text" value="001"/>	Category/ Type			
Activity or Event Identifier: ADMINISTRATIVE						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="68.20"/>			<input type="text" value="175.36"/>			<input type="text" value="243.56"/>

B. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input 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			Allocated Activity or Event Year-To-Date _____			
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>			
Purpose of Disbursement:		<input type="text"/>	Category/ Type			
Activity or Event Identifier:						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text"/>			<input type="text"/>			<input type="text"/>

C. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input 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			Allocated Activity or Event Year-To-Date _____			
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>			
Purpose of Disbursement:		<input type="text"/>	Category/ Type			
Activity or Event Identifier:						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text"/>			<input type="text"/>			<input type="text"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

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
<input type="text" value="8276.92"/>		<input type="text" value="21283.46"/>		<input type="text" value="29560.38"/>