

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

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

FOR LINE NUMBER: PAGE 27 OF 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. STOLZ, RICHARD, H., ,

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

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

Transaction ID : SA11A.1075086

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. STUBBS, YVONNE, D., ,

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

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

Transaction ID : SA11A.1075229

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

C. SULLIVAN, DENNIS, M., DR., M.D.

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

M M / D D / Y Y Y Y Y
09 / 18 / 2019

Transaction ID : SA11A.1074848

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

475.00