

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Glenn Grothman for Congress

ADDRESS (number and street)

PO Box 1215

Check if different than previously reported. (ACC)

Fond du Lac

WI

54964-1215

2. FEC IDENTIFICATION NUMBER ▼

C C00561597

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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)
- Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on 11 / 04 / 2014 in the State of WI

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 2014

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 Kate Lind

Signature of Treasurer Kate Lind

[Electronically Filed]

Date

11 / 04 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Glenn Grothman for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	171879.28	746425.86
(b) Total Contribution Refunds (from Line 20(d))	0.00	300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	171879.28	746125.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	137445.71	699811.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	929.86	4870.03
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	136515.85	694941.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	181183.93	
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).....	142500.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

Glenn Grothman for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	93951.26	410211.41
(ii) Unitemized.....	25828.02	145592.82
(iii) TOTAL of contributions from individuals ▶	119779.28	555804.23
(b) Political Party Committees.....	2000.00	5240.00
(c) Other Political Committees (such as PACs).....	50100.00	185001.63
(d) The Candidate.....	0.00	380.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	171879.28	746425.86
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	130000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	130000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	929.86	4870.03
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	172809.14	881295.89

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	137445.71	699811.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	50.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	300.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	137445.71	700111.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	145820.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	172809.14
25. SUBTOTAL (add Line 23 and Line 24).....	318629.64
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	137445.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	181183.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM ABRAHAM JR.

Mailing Address 11698 N CANTERBURY LANE, 41W

City MEQUON State WI Zip Code 53092-8305

FEC ID number of contributing federal political committee.

Name of Employer FOLEY & LARDNER Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2532

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES ALLAN

Mailing Address 5155 CHESAPEAKE CT

City OSHKOSH State WI Zip Code 54901-1329

FEC ID number of contributing federal political committee.

Name of Employer VERUS INVESTMENT ADVISORY GROUP INC Occupation INVESTMENT ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2792

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL ANSAY

Mailing Address 603 KARA LANE

City GRAFTON State WI Zip Code 53024-9563

FEC ID number of contributing federal political committee.

Name of Employer ANSAY & ASSOCIATES Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3007

Amount of Each Receipt this Period

CONTRIBUTION

IN-KIND: OFFICE RENT

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
PERRY ARMSTRONG

Mailing Address **2728 COHO STREET**

City **MADISON** State **WI** Zip Code **53713-3015**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3151

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JANICE BALDOCK

Mailing Address **P.O. BOX 335**

City **ST. CLOUD** State **WI** Zip Code **53079-0335**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
712.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2674

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HAROLD BARFKNECHT

Mailing Address **N6734 TRIPLE T RD**

City **MOUNT CALVARY** State **WI** Zip Code **53057-9615**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11.3012

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 85	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. HAROLD BARFKNECHT		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address N6734 TRIPLE T RD		Transaction ID : SA11.3025
City MOUNT CALVARY	State WI	Zip Code 53057-9615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00 CONTRIBUTION
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. DOUGLAS BAYERLEIN		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 34675 BARTLETT ROAD		Transaction ID : SA11.2824
City OCONOMOWOC	State WI	Zip Code 53066-4901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00 CONTRIBUTION
Name of Employer BAY-SAN CO INC.	Occupation MANAGEMENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) C. JAMES BERENZ		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 675 KETTLE RIDGE		Transaction ID : SA11.3068
City COLGATE	State WI	Zip Code 53017-9105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
STEVEN BERGUM

Mailing Address 2016 BAY POINT LN

City HARTLAND State WI Zip Code 53029-9343

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.2823

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROHN BISHOP

Mailing Address 200 BRANDON STREET

City WAUPUN State WI Zip Code 53963-1304

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

Name of Employer HOMAN AUTO Occupation DETAILER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2668

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM BRATT

Mailing Address P.O. BOX 613

City CEDARBURG State WI Zip Code 53012-0613

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

Name of Employer SELF-EMPLOYED Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11.2874

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
DR. MARY BREGER

Mailing Address 3701 COUNTY HWY NN

City WEST BEND State WI Zip Code 53095-8763

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

Name of Employer MARY T. BREGER, MD, SC Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11.2850

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUE BRITTON

Mailing Address 1672 DOTY ST

City OSHKOSH State WI Zip Code 54902-6946

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2626

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL BUTLER

Mailing Address P.O. BOX 323

City BROWNSVILLE State WI Zip Code 53006-0323

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

Name of Employer OAKDALE PROPERTIES Occupation LANDLORD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2663

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JAMES CARAWAY

Mailing Address 9364 N LAKE DRIVE

City BAYSIDE State WI Zip Code 53217-1446

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

Name of Employer COAST GUARD FOUNDATION INC Occupation PAST CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2726

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNE CARPENTER

Mailing Address 12494 N ROYAL LANE

City MEQUON State WI Zip Code 53092-8554

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11.3094

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAROL CARPENTER

Mailing Address 656 W EVERGREEN COURT

City MILWAUKEE State WI Zip Code 53217-1608

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2730

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
M. THOMAS CHEMOTTI

Mailing Address **N94W6539 FIELDCREST STREET**

City **CEDARBURG** State **WI** Zip Code **53012-1230**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : SA11.2698

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN E. CRESS

Mailing Address **716 N 9TH STREET**

City **MANITOWOC** State **WI** Zip Code **54220-3926**

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

Name of Employer **PRACTICAL PORTFOLIOS** Occupation **INVESTMENT ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 08 / 2014

Transaction ID : SA11.2837

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
VERONICA CUMMINGS

Mailing Address **S42W34721 BIG OAK DRIVE**

City **DOUSMAN** State **WI** Zip Code **53118-9717**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2675

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM CURRY JR.

Mailing Address 2113 MONROE STREET

City State Zip Code
NEW HOLSTEIN WI 53061-1103

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

Name of Employer Occupation
CJ MEISELWITZ OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11.2986

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHUCK D'AMICO

Mailing Address 4328 W. SQUIRE RD.

City State Zip Code
MEQUON WI 53092-2174

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

Name of Employer Occupation
JORGENSEN CONVEYORS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.2825

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RUSS DARROW

Mailing Address W133 N8569 EXECUTIVE PARKWAY

City State Zip Code
MENOMONEE FALLS WI 53051-3344

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3057

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JANE DEAN

Mailing Address **W1976 RUSTIC DRIVE**

City **CAMPBELLSPORT** State **WI** Zip Code **53010-3124**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11.2983

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CRAIG DEVENPORT

Mailing Address **6245 SCENIC DRIVE W**

City **WEST BEND** State **WI** Zip Code **53095-3616**

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

Name of Employer **WEST BEND AIR, INC** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11.2607

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ERWIN DOHMEN

Mailing Address **5110 COUNTRY CLUB BEACH ROAD**

City **PORT WASHINGTON** State **WI** Zip Code **53074-9642**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 08 / 2014

Transaction ID : SA11.2863

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JOSEPH FAZIO

Mailing Address **N33 W7030 BUCHANAN ST**

City **CEDARBURG** State **WI** Zip Code **53012-2213**

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

Name of Employer **COMMERCE STATE BANK** Occupation **CHAIRMAN/CEO/CO-FOUNDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3167

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROSEMARY FICKERT

Mailing Address **125 S CEDAR RIDGE DRIVE 136**

City **WEST BEND** State **WI** Zip Code **53095-3668**

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

Name of Employer **NA** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11.2881

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAURIE FISCHER-GALANTE

Mailing Address **4252 RIVER FOREST CIRCLE**

City **PULASKI** State **WI** Zip Code **54162-9795**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3147

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 15 OF 85
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JEROME M. FISHER

Mailing Address 15 BAYSIDE DRIVE

City MADISON State WI Zip Code 53704-5901

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.2847

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN FLESCH

Mailing Address 5678 ASHBOURNE LANE

City MADISON State WI Zip Code 53711-6967

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

Name of Employer GORDON FLESCH CO Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3152

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JENNIE FREDERICK

Mailing Address N171W20471 VALLEY DRIVE

City JACKSON State WI Zip Code 53037-9450

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

Name of Employer AT&T Occupation SENIOR PROGRAM MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11.3133

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MARY GLENN FUCHS

Mailing Address 125 W GLENVIEW COURT

City State Zip Code
MEQUON WI 53092-6214

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2732

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN GALLO

Mailing Address 1122 RIVERVIEW CT

City State Zip Code
GRAFTON WI 53024-1609

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

Name of Employer Occupation
HOUSEMAN & FEIND, LLP LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11.3014

Amount of Each Receipt this Period
200.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT GANNON

Mailing Address 4833 CEDAR HILLS DRIVE

City State Zip Code
SLINGER WI 53086-9514

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

Name of Employer Occupation
RICHARDS INSURANCE INSURANCE SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3175

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 17 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
PAUL GEHL

Mailing Address 203 S 10TH STREET, BOX 303

City State Zip Code
HILBERT WI 54129-9595

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2761

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEVIN GERARD

Mailing Address 9089 N BAYSIDE DRIVE

City State Zip Code
MILWAUKEE WI 53217-1915

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

Name of Employer Occupation
CHARLES SCHWAB INDEPENDENT BRANCH LEADER AND FINA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2672

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY GOEBEL

Mailing Address 1915 KNAPP STREET

City State Zip Code
OSHKOSH WI 54902-6612

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

Name of Employer Occupation
GOEBEL GROUP BENEFITS LLC INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2664

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
LARRY GOEBEL

Mailing Address **N5138 STATE ROAD 175**

City **FOND DU LAC** State **WI** Zip Code **54937-9202**

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

Name of Employer **GOEBEL INSURANCE AND FINANCIAL INC** Occupation **INSURANCE AND FINANCIAL CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2665

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD GROSSMAN

Mailing Address **11702 W MEQUON ROAD**

City **MEQUON** State **WI** Zip Code **53097-2811**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3126

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS GROSS

Mailing Address **910 COUNTRY CLUB LANE**

City **FOND DU LAC** State **WI** Zip Code **54935-9702**

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

Name of Employer **AHREN GROSS PLUMBING** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1106.26**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2669

Amount of Each Receipt this Period
800.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
THOMAS GROSS

Mailing Address 910 COUNTRY CLUB LANE

City State Zip Code
FOND DU LAC WI 54935-9702

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

Name of Employer Occupation
AHREN GROSS PLUMBING PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1106.26

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.3004

Amount of Each Receipt this Period
 156.26

CONTRIBUTION

IN-KIND: FOOD AND BEVERAGE AT EVENT

B. Full Name (Last, First, Middle Initial)
GRANT GROTHMAN

Mailing Address 13345 LAUREL LANE

City State Zip Code
MEQUON WI 53097-2426

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

Name of Employer Occupation
NORTHWESTERN MUTUAL LIFE INSUR INVESTMENT OPTIONS MGR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
857.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2728

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KENNETH GROTHMAN

Mailing Address W337 S5059 ROAD GG

City State Zip Code
DOUSMAN WI 53118-9733

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

Name of Employer Occupation
AMERICAN ENTERTAINMENT OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2627

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

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

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

3006.26

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
RICHARD HANSEN

Mailing Address P.O. BOX 429

City State Zip Code
WAUTOMA WI 54982-0429

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11.3174

Amount of Each Receipt this Period
 CONTRIBUTION
250.00

B. Full Name (Last, First, Middle Initial)
KATHRYN HAPP

Mailing Address 8610 W HAWTHORNE ROAD

City State Zip Code
MEQUON WI 53097-2010

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2727

Amount of Each Receipt this Period
 CONTRIBUTION
2600.00

C. Full Name (Last, First, Middle Initial)
WILLIAM HARDT

Mailing Address 10324 N VERSAILLES COURT

City State Zip Code
MEQUON WI 53092-5231

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

Name of Employer Occupation
NORTHLAKE ENGINEERING PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11.2748

Amount of Each Receipt this Period
 CONTRIBUTION
300.00

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
RODNEY HELLER

Mailing Address 2906 SIGGELKOW RD

City MCFARLAND State WI Zip Code 53558-9631

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

Name of Employer EPL Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11.3153

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRISTINE HENKEL

Mailing Address W5154 COUNTY ROAD U

City PLYMOUTH State WI Zip Code 53073-4735

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11.2616

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSEPH HENRY

Mailing Address 7794 PATTON RD

City DANE State WI Zip Code 53529-9715

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

Name of Employer SELF-EMPLOYED Occupation FARMING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11.2799

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
BEA M. HOLLFELDER

Mailing Address **N7889 LAKESIDE PARK ROAD**

City **ELKHART LAKE** State **WI** Zip Code **53020-1811**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.3211

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS HOLLFELDER

Mailing Address **N7889 LAKESIDE PARK ROAD**

City **ELKHART LAKE** State **WI** Zip Code **53020-1811**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.3212

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL HOLLOWAY

Mailing Address **425 LAKE BLUFF LANE**

City **GRAFTON** State **WI** Zip Code **53024-9764**

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

Name of Employer **NORTHWESTERN MUTUAL** Occupation **INVESTMENT MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2733

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. MICHAEL HOWE		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 828 VIEBAHN ST		Transaction ID : SA11.2800
City MANITOWOC	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer MIKE HOWE BUILDERS	Occupation HOMEBUILDER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. GLADYS HUBER		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 707 W PIONEER RD		Transaction ID : SA11.2697
City MEQUON	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 150.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 475.00	

Full Name (Last, First, Middle Initial) C. THOMAS JACHIMSTAL		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 5028 RIVER HEIGHTS DR		Transaction ID : SA11.2793
City MANITOWOC	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 500.00
Name of Employer GT MACINE LLC	Occupation OWNER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
CYNTHIA JETZER

Mailing Address 18814 TWIN BAY LANE

City State Zip Code
KIEL WI 53042-3761

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.2841

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARY JOHNSON

Mailing Address 5144 I AH MAY TAH ROAD

City State Zip Code
OSHKOSH WI 54901-1313

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11.2605

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT KELLER

Mailing Address P.O. BOX 368

City State Zip Code
NEENAH WI 54957-0368

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

Name of Employer Occupation
JJ KELLER AND ASSOCIATES CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2752

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

5600.00

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

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

FOR LINE NUMBER: PAGE 25 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
TED KELLNER

Mailing Address 5112 W HIGHLAND ROAD

City State Zip Code
MEQUON WI 53092-1137

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

Name of Employer Occupation
FIDUCIARY MANAGEMENT EXECUTIVE/CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11.3139

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALLAN KIECKHAFER

Mailing Address 818 CRESTVIEW DR

City State Zip Code
WEST BEND WI 53095-4626

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11.3016

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY KOHLER

Mailing Address PO BOX 897

City State Zip Code
SHEBOYGAN WI 53082-0897

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

Name of Employer Occupation
WINDWAY CAPITAL CORP. PUBLIC AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11.2961

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
TERRY KOHLER

Mailing Address **PO BOX 897**

City **SHEBOYGAN** State **WI** Zip Code **53082-0897**

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

Name of Employer **WINDWAY CAPITAL CORP** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11.2958

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL KUECHLER

Mailing Address **893 COUNTRY CLUB LANE**

City **FOND DU LAC** State **WI** Zip Code **54935-8715**

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

Name of Employer **SCHENK SC** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2666

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS KUESTER

Mailing Address **777 N PROSPECT AVE #403**

City **MILWAUKEE** State **WI** Zip Code **53202-**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3247

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

SEE REATTRIBUTION

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

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

8050.00

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

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

FOR LINE NUMBER: PAGE 27 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
DENNIS KUESTER

Mailing Address 777 N PROSPECT AVE #403

City State Zip Code
MILWAUKEE WI 53202-

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3247B

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION TO SPOUSE**

B. Full Name (Last, First, Middle Initial)
SANDY KUESTER

Mailing Address 777 N PROSPECT AVE #403

City State Zip Code
MILWAUKEE WI 53202-

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3248

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**

C. Full Name (Last, First, Middle Initial)
VLADIMIR KUSHNARYOV

Mailing Address 409 N MAIN STREET, APT G

City State Zip Code
THIENSVILLE WI 53092-6505

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11.2889

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
STEPHEN LANDOLT

Mailing Address 1513 CLAIRVILLE ROAD

City OSHKOSH State WI Zip Code 54904-9036

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

Name of Employer FINANCIAL WEST CORPORATION Occupation STOCK BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11.2988

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TODD LAVEY

Mailing Address 47 OAKRIDGE COURT

City FOND DU LAC State WI Zip Code 54937-7614

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

Name of Employer MFC INC. Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2660

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KATHLEEN LAWLOR

Mailing Address 10425 N BIRCH COURT

City MEQUON State WI Zip Code 53092-5996

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

Name of Employer NONE Occupation HOME MAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
930.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2729

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL LAWTON

Mailing Address **6 S EAU CLAIRE AVENUE**

City **MADISON** State **WI** Zip Code **53705-4742**

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

Name of Employer **BOARDMAN AND CLARK LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3170

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STANLEY LEEDLE

Mailing Address **2017 MENOMINEE DRIVE**

City **OSHKOSH** State **WI** Zip Code **54901-2527**

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

Name of Employer **CHOICE BANK** Occupation **BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3145

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN LEJA

Mailing Address **5603 SURREY LANE**

City **WAUNAKEE** State **WI** Zip Code **53597-8706**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3160

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

3600.00

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT LENGH

Mailing Address 3338 FLEUR DE LIS DRIVE

City State Zip Code
MEQUON WI 53092-2359

FEC ID number of contributing federal political committee.

Name of Employer Occupation
WEIMER BEARING AND TRANSMISSION SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Transaction ID : SA11.2854

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID LENZ

Mailing Address P.O. BOX 660994

City State Zip Code
MIDDLETON WI 53562-

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NORTH CENTRAL GROUP CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Transaction ID : SA11.2848

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID LEWIS

Mailing Address 2331 SKYLARK DRIVE

City State Zip Code
APPLETON WI 54914-1693

FEC ID number of contributing federal political committee.

Name of Employer Occupation
JOHN BIRCH SOCIETY ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Transaction ID : SA11.2858

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 31 OF 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
RAYMOND LIPMAN

Mailing Address **4837 MUELLER LN**

City **WEST BEND** State **WI** Zip Code **53095-9263**

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

Name of Employer **WESTBURY BANK** Occupation **BANKING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3031

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM MACKENZIE

Mailing Address **1815 BERNHEIM STREET**

City **OSHKOSH** State **WI** Zip Code **54904-8968**

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

Name of Employer **SELF-EMPLOYED** Occupation **HEALTHCARE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2754

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOUGLAS MACNEIL

Mailing Address **1715 W WINSLOW CT**

City **MEQUON** State **WI** Zip Code **53092-5061**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 08 / 2014

Transaction ID : SA11.2795

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MARK MCCABE

Mailing Address 705 RIVER OAKS DR

City State Zip Code
SHEBOYGAN FALLS WI 53085-1045

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MCCLONE INSURANCE SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2723

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDAL MEFFERT

Mailing Address 5964 HIGHWAY K

City State Zip Code
WAUNAKEE WI 53597-9413

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MEFFERT OIL CO INC PRESIDENT/ADMINISTRATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3168

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DON MILLIS

Mailing Address 408 S WALKER WAY

City State Zip Code
SUN PRAIRIE WI 53590-2658

FEC ID number of contributing federal political committee.

Name of Employer Occupation
REINHART BOERNER VAN DEUREN SC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3169

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 33 OF 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MARY MOHS

Mailing Address 512 WISCONSIN AVENUE

City State Zip Code
MADISON WI 53703-1403

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

Name of Employer Occupation
MADISON LAND CO. LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.2849

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SEE REATTRIBUTION

B. Full Name (Last, First, Middle Initial)
FREDERIC MOHS

Mailing Address 20 N CARROLL ST

City State Zip Code
MADISON WI 53703-2707

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

Name of Employer Occupation
MOHS, MACDONALD, WIDDER ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2900.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3215

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
MARY MOHS

Mailing Address 512 WISCONSIN AVENUE

City State Zip Code
MADISON WI 53703-1403

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

Name of Employer Occupation
MADISON LAND CO. LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.2849B

Amount of Each Receipt this Period
-2400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 34 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
CLAUDETTE MOLL

Mailing Address 8318 HILLTOP LANE

City State Zip Code
KEWASKUM WI 53040-9230

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1521.20

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11.3181

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEPHEN MORTON

Mailing Address 416 CAMBRIDGE COURT

City State Zip Code
NEENAH WI 54956-4607

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

Name of Employer Occupation
MORTON DRUG COMPANY CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.2859

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS MYERS

Mailing Address 300 W TRILLIUM ROAD, 103N

City State Zip Code
MEQUON WI 53092-6165

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

Name of Employer Occupation
REINHART BOERNER SC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11.2872

Amount of Each Receipt this Period
300.00

CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
TIMOTHY NEUVILLE

Mailing Address **E1846 MELODY LN**

City **WAUPACA** State **WI** Zip Code **54981-8318**

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

Name of Employer **NEUVILLE AUTOMOTIVE** Occupation **CAR DEALER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3033

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN O'HARE

Mailing Address **5006 W PARKVIEW DRIVE**

City **MEQUON** State **WI** Zip Code **53092-2029**

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

Name of Employer **THE O'HARE GROUP** Occupation **VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2736

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK O'MEARA

Mailing Address **652 S 8TH AVENUE**

City **WEST BEND** State **WI** Zip Code **53095-3906**

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

Name of Employer **WEST BEND CLINIC** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3185

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
CRAIG PAYNE

Mailing Address 1204 HIAWATHA DR

City State Zip Code
BEAVER DAM WI 53916-1222

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.2798

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIM PEDERSEON

Mailing Address P.O. BOX 260

City State Zip Code
HARTLAND WI 53029-0260

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

Name of Employer Occupation
DIVERSIFIED BENEFIT SERVICES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2737

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM PETER

Mailing Address 9848 N THORNAPPLE LANE

City State Zip Code
MEQUON WI 53092-6262

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

Name of Employer Occupation
NORTHWESTERN EXTRACT CO SELF EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3038

Amount of Each Receipt this Period
200.00

CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JOLENE PLAUTZ

Mailing Address 4741 HAYES ROAD, APT 14

City MADISON State WI Zip Code 53704-7738

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

Name of Employer JOLENE PLAUTZ GOVERNMENT RELAT Occupation LOBBYIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.3158

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARGARET POTRATZ

Mailing Address 1931 KNOTT ROAD

City OSHKOSH State WI Zip Code 54904-6839

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

Name of Employer POTRATZ-POTRATZ Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2753

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT PRENTICE

Mailing Address 514 FAIRVIEW AVENUE

City RIPON State WI Zip Code 54971-1615

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

Name of Employer AFK CORP Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2661

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
RALPH PRESCOTT

Mailing Address N1889 MAPLE HEIGHTS BEACH

City State Zip Code
GHILTON WI 53014-9485

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11.2990

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS PROSSER

Mailing Address 1028 SURREY COURT

City State Zip Code
NEENAH WI 54956-4232

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2755

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM A. RAATHS

Mailing Address 1234 LAKESHORE DR

City State Zip Code
MENASHA WI 54952-1322

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11.2991

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
LINDA REES

Mailing Address 324 WASHINGTON CT

City THIENSVILLE State WI Zip Code 53092-1704

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11.2764

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LINDA REES

Mailing Address 324 WASHINGTON CT

City THIENSVILLE State WI Zip Code 53092-1704

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11.3034

Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLENN REINDERS

Mailing Address 3479 SHERMAN ROAD

City JACKSON State WI Zip Code 53037-9778

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11.2772

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

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

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

135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
DOLORES REMMICK

Mailing Address 7700 S 51ST STREET, APT 212

City FRANKLIN	State WI	Zip Code 53132-9079
------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3059

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID RICHARDSON SR.

Mailing Address 455 RIVER OAKS DRIVE

City SHEBOYGAN FALLS	State WI	Zip Code 53085-1072
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RICHARDSON LUMBER	Occupation CHAIRMAN
---------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2713

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER ROE

Mailing Address 2 HAWK FEATHER CIRCLE

City MADISON	State WI	Zip Code 53717-2744
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer CUNA MUTUAL GROUP	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3159

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 41 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
BRANDON SCHOLZ

Mailing Address **33 E MAIN STREET, STE 701**

City **MADISON** State **WI** Zip Code **53703-4655**

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

Name of Employer **WISCONSIN GROCERS ASSOCIATION INC** Occupation **PRESIDENT/CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3164

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN SENSENBRENNER JR.

Mailing Address **P.O. BOX 67**

City **NEENAH** State **WI** Zip Code **54957-0067**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2759

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOAN SEYFERT

Mailing Address **834 HOMESTEAD DRIVE**

City **WEST BEND** State **WI** Zip Code **53090-9045**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
255.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11.3182

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JOHN SHEEHAN

Mailing Address 9075 N RANGE LINE ROAD

City RIVER HILLS State WI Zip Code 53217-1011

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

Name of Employer BEECHWOOD SALES Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 11 / 2014

Transaction ID : SA11.3135

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MURRAY SIM

Mailing Address 703 N 6TH ST

City MANITOWOC State WI Zip Code 54220-3940

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

Name of Employer CLEAN ENERGY NORTH AMERICA Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11.2610

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CYNTHIA SLAVISH

Mailing Address 1635 EMERSON STREET

City BELOIT State WI Zip Code 53511-5605

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.3165

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
DR. FRANKLIN SMITH

Mailing Address **W338 N5215 TOWNSHIP ROAD O**

City **NASHOTAH** State **WI** Zip Code **53058-9304**

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

Name of Employer **AURORA MEDICAL GROUP** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **685.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3024

Amount of Each Receipt this Period
185.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LINDA SMITH

Mailing Address **1319 LANCE DRIVE**

City **TWIN LAKES** State **WI** Zip Code **53181-9772**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3177

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT SPINDELL

Mailing Address **1626 N PROSPECT AVENUE**

City **MILWAUKEE** State **WI** Zip Code **53202-2493**

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

Name of Employer **SPINDELL GROUP LLC** Occupation **BUSINESS BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3140

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

485.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
DR. DAVID STELTER

Mailing Address **N1720 STATE ROAD 73**

City **WAUTOMA** State **WI** Zip Code **54982-5263**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3032

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARBARA STRUCK

Mailing Address **10133 W HAWTHORNE ROAD**

City **MEQUON** State **WI** Zip Code **53097-1909**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 08 / 2014

Transaction ID : SA11.2852

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER SWAIN

Mailing Address **10927 N WYNGATE TRACE**

City **MEQUON** State **WI** Zip Code **53092-5862**

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

Name of Employer **NORTHWESTERN MUTUAL LIFE** Occupation **INSURANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2731

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
SCOTT SWICK

Mailing Address **N7170 WINNEBAGO DR**

City **FOND DU LAC** State **WI** Zip Code **54935-2751**

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

Name of Employer **FIRST WEBER GROUP** Occupation **REALTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11.2955

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOANNE TIERNEY

Mailing Address **3564 EGRE ROAD**

City **DEFOREST** State **WI** Zip Code **53532-2834**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3172

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFF TREMBLY

Mailing Address **3040 WILDERNESS PLACE**

City **OSHKOSH** State **WI** Zip Code **54904-6593**

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

Name of Employer **TREMBLY ENTERPRISES LLC** Occupation **MEMBER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11.2614

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
DAVID UIHLEIN JR.

Mailing Address 8265 N RIVER ROAD

City State Zip Code
MILWAUKEE WI 53217-2546

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

Name of Employer Occupation
UIHLEIN WILSON ARCHITECT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2735

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID UIHLEIN JR.

Mailing Address 8265 N RIVER ROAD

City State Zip Code
MILWAUKEE WI 53217-2546

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

Name of Employer Occupation
UIHLEIN WILSON ARCHITECT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2735B

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
DAVID UIHLEIN JR.

Mailing Address 8265 N RIVER ROAD

City State Zip Code
MILWAUKEE WI 53217-2546

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

Name of Employer Occupation
UIHLEIN WILSON ARCHITECT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.3214

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
PRIMARY DEBT RETIREMENT REDESIGNATION FROM GENERAL

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

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

5200.00

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

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

FOR LINE NUMBER: PAGE 47 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL WAGNER

Mailing Address **W7898 DIKE RD**

City **FOND DU LAC** State **WI** Zip Code **54937-9771**

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

Name of Employer **ELECTRO PLATING INC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2659

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIMBERLY WALLNER

Mailing Address **620 WILD OAK DRIVE**

City **MANITOWOC** State **WI** Zip Code **54220-9050**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.2836

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHERYLL WEEKLY

Mailing Address **P.O. BOX 652**

City **WAUTOMA** State **WI** Zip Code **54982-0652**

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

Name of Employer **WEEKLY TIMBER & PULP INC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3035

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

3150.00

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

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

FOR LINE NUMBER: PAGE 48 OF 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
JOHN V. WENUM

Mailing Address 427 HUNTERS HILL TR

City State Zip Code
COLGATE WI 53017-9543

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3176

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID WILLEFORD

Mailing Address P.O. BOX 310

City State Zip Code
OMRO WI 54963-0310

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DERKSEN PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3146

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DANIEL WITKOWSKI

Mailing Address 1612 N WISCONSIN STREET

City State Zip Code
PORT WASHINGTON WI 53074-1042

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DANIEL WITKOWSKI DDC SC DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2857

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MARY WUTKE

Mailing Address **6 SHEFFORD CIRCLE**

City **MADISON** State **WI** Zip Code **53719-1415**

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

Name of Employer **SELF-EMPLOYED** Occupation **FINANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2625

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALLEN ZAUG

Mailing Address **250 N PARK AVENUE**

City **NEENAH** State **WI** Zip Code **54956-2958**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SA11.2758

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

750.00

93951.26

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 85
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
MARQUETTE COUNTY REPUBLICAN PARTY

Mailing Address W6717 COUNTY P

City ENDEAVOR State WI Zip Code 53930-

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11.2997

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

FUNDS FEDERALLY PERMISSIBLE

B. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF THE 6TH DISTRICT

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C** C00008755

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2447

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF THE 6TH DISTRICT

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C** C00008755

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11.2447B

Amount of Each Receipt this Period
 -240.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO PRIMARY

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 85
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF THE 6TH DISTRICT

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C** C00008755

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11.3218

Amount of Each Receipt this Period
240.00

CONTRIBUTION

[MEMO ITEM]
 PRIMARY DEBT RETIREMENT REDESIGNATION FROM GENERAL

B. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF SHEBOYGAN COUNTY

Mailing Address PO BOX 288

City State Zip Code
 SHEBOYGAN WI 53082-0288

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2780

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

FUNDS FEDERALLY PERMISSIBLE

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1500.00

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
ELLIS TO MADISON COMMITTEE

Mailing Address 1752 COUNTY TRUNK HIGHWAY GG

City State Zip Code
NEENAH WI 54956-

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2998

Amount of Each Receipt this Period

CONTRIBUTION

FUNDS FEDERALLY PERMISSIBLE

B. Full Name (Last, First, Middle Initial)
FRIENDS OF PAUL TITTL

Mailing Address 115 E WALDO BOULEVARD

City State Zip Code
MANITOWOC WI 54220-2921

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3002

Amount of Each Receipt this Period

CONTRIBUTION

FUNDS FEDERALLY PERMISSIBLE

C. Full Name (Last, First, Middle Initial)
WACO-PAC

Mailing Address PO BOX 130

City State Zip Code
GALESVILLE WI 54630-0130

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2999

Amount of Each Receipt this Period

CONTRIBUTION

FUNDS FEDERALLY PERMISSIBLE

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
ALLIANT ENERGY CORP EMPLOYEE'S PAC

Mailing Address 801 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2615

FEC ID number of contributing federal political committee. **C** C00132092

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11.2996

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION

Mailing Address 1120 CONNECTICUT AVENUE NW

City WASHINGTON State DC Zip Code 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.3191

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN FAMILY MUTUAL INSURANCE CO PAC

Mailing Address 6000 AMERICAN PARKWAY

City MADISON State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.3193

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
ASA POLITICAL ACTION COMMITTEE

Mailing Address 1200 N ARLINGTON HEIGHTS RD
SUITE 150

City ITASCA State IL Zip Code 60143-

FEC ID number of contributing federal political committee. **C** C00166074

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3220

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ASIAN AMERICAN HOTEL OWNER ASSN PAC

Mailing Address 228 S WASHINGTON ST #114

City ALEXANDRIA State VA Zip Code 22314-

FEC ID number of contributing federal political committee. **C** C00336743

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3222

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS PAC

Mailing Address 440 FIRST ST NW

City WASHINGTON State DC Zip Code 20001-2028

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11.3000

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

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

Mailing Address 208 S AKARD STREET, STE 2701

City DALLAS State TX Zip Code 75202-4206

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11.2779

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CITIZENS UNITED POLITICAL VICTORY FUND

Mailing Address 1006 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003-2142

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2781

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CULAC PAC

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.3189

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. FOOD PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2346 CRYSTAL DR #800
 City ARLINGTON State VA Zip Code 22202-
 FEC ID number of contributing federal political committee. **C** C00014555
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014
Transaction ID : SA11.3221
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. GOP GENERATION Y FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 9055
 City PEORIA State IL Zip Code 61612-9055
 FEC ID number of contributing federal political committee. **C** C00448191
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : SA11.2778
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. JOBS, ECONOMY AND BUDGET FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 30844
 City BETHESDA State MD Zip Code 20824-0844
 FEC ID number of contributing federal political committee. **C** C00420695
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2014
Transaction ID : SA11.3195
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

8500.00

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

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

FOR LINE NUMBER: PAGE 57 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

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

Mailing Address 600 14TH ST NW, STE 800

City WASHINGTON State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11.2994

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOUISIANA-PACIFIC PAC

Mailing Address 414 UNION ST SUITE 2000

City NASHVILLE State TN Zip Code 37219-1711

FEC ID number of contributing federal political committee. **C C00109165**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11.2995

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MADISON PROJECT

Mailing Address PO BOX 655

City ALEDO State TX Zip Code 76008-0655

FEC ID number of contributing federal political committee. **C C00298000**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11.3196

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

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

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

10500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. NATIONAL GROCERS ASSOCIATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1005 N GLEBE ROAD, STE 250
 City ARLINGTON State VA Zip Code 22201-5758
 FEC ID number of contributing federal political committee. **C** C00508770
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA11.3199
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. NFIB SAFE TRUST
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 F STREET NW, STE 200
 City WASHINGTON State DC Zip Code 20004-1221
 FEC ID number of contributing federal political committee. **C** C00101105
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA11.3198
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. OUTDOOR ADVERTISING PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 M STREET NW 1040
 City WASHINGTON State DC Zip Code 20036-5821
 FEC ID number of contributing federal political committee. **C** C00045781
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : SA11.2777
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
PNC PAC

Mailing Address **249 5TH AVENUE**

City **PITTSBURGH** State **PA** Zip Code **15222-2707**

FEC ID number of contributing federal political committee. **C C00035519**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11.2776

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SENTRY INSURANCE PAC

Mailing Address **1800 N POINT DR**

City **STEVENS POINT** State **WI** Zip Code **54481-1253**

FEC ID number of contributing federal political committee. **C C00545194**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11.3194

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SPECIALTY EQUIPMENT MARKET ASSOCIATION PAC

Mailing Address **1575 S VALLEY VISTA DR**

City **DIAMOND BAR** State **CA** Zip Code **91765-**

FEC ID number of contributing federal political committee. **C C00389403**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11.3219

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. SUPPORTING CONSERVATIVES OF TODAY TOMMORROW

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 905

City State Zip Code
NEWTON NJ 07860-0905

FEC ID number of contributing federal political committee. **C** C00453324

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11.2782

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. TAVERN LEAGUE OF WISCONSIN FED PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2817 FISH HATCHERY ROAD

City State Zip Code
FITCHBURG WI 53713-5005

FEC ID number of contributing federal political committee. **C** C00429159

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11.3003

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. THRIVENT FINANCIAL FOR LUTHERANS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1892

City State Zip Code
APPLETON WI 54912-1892

FEC ID number of contributing federal political committee. **C** C00121319

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11.3197

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH STREET NW, SUITE 350

City State Zip Code
WASHINGTON DC 20002-

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11.3001

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
US VENTURE PAC

Mailing Address 425 BETTER WAY

City State Zip Code
APPLETON WI 54915-6192

FEC ID number of contributing federal political committee. **C** C00558411

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11.3190

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3000.00

50100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
PHILIPS BOROWSKI SC

Mailing Address 10140 N PORT WASHINGTON RD

City State Zip Code
MEQUON WI 53092

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
929.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 04 2014

Transaction ID : SA14.366

Amount of Each Receipt this Period
 929.86
 REFUND OF LEGAL FEES

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

929.86

929.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. MICHAEL ANSAY		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 603 KARA LANE		Amount of Each Disbursement this Period 500.00
City GRAFTON	State WI	Zip Code 53024-9563
Purpose of Disbursement IN-KIND CONTRIBUTION	Category/Type	
Candidate Name	Transaction ID : SB17.3007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND: OFFICE RENT
State: District:		

Full Name (Last, First, Middle Initial) B. BEN BARTOS		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address N77 W15154 CROSSWAY DR		Amount of Each Disbursement this Period 450.00
City MENOMONEE FALLS	State WI	Zip Code 53051
Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	Category/Type	
Candidate Name	Transaction ID : SB17.I417	
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. BEN BARTOS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address N77 W15154 CROSSWAY DR		Amount of Each Disbursement this Period 450.00
City MENOMONEE FALLS	State WI	Zip Code 53051
Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	Category/Type	
Candidate Name	Transaction ID : SB17.I438	
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).....	1400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. BEN BARTOS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address N77 W15154 CROSSWAY DR		Amount of Each Disbursement this Period 397.95
City MENOMONEE FALLS	State WI	Zip Code 53051
Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/Type	
Candidate Name	Transaction ID : SB17.I449	
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. ADAM GIBBS		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 830 EMERSON ST		Amount of Each Disbursement this Period 289.99
City MADISON	State WI	Zip Code 53715
Purpose of Disbursement EXPENSE REIMBURSEMENT	Category/Type	
Candidate Name	Transaction ID : SB17.I411	
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. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 1346 PORT WASHINGTON ROAD		Amount of Each Disbursement this Period 190.07
City GRAFTON	State WI	Zip Code 53024
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	
Candidate Name	Transaction ID : SB17.I465	
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).....	687.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 99 W SECOND ST		Amount of Each Disbursement this Period 96.75
City FOND DU LAC	State WI Zip Code 55935	
Purpose of Disbursement POSTAGE	Category/Type	Transaction ID : SB17.I464
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]
State: District:		

Full Name (Last, First, Middle Initial) B. ADAM GIBBS		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 830 EMERSON ST		Amount of Each Disbursement this Period 3200.00
City MADISON	State WI Zip Code 53715	
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type	Transaction ID : SB17.I414
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADAM GIBBS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 830 EMERSON ST		Amount of Each Disbursement this Period 800.00
City MADISON	State WI Zip Code 53715	
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type	Transaction ID : SB17.I443
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. ADAM GIBBS			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014		
Mailing Address 830 EMERSON ST			Amount of Each Disbursement this Period 391.88		
City MADISON	State WI	Zip Code 53715	Transaction ID : SB17.I450		
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. ADAM GIBBS			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 830 EMERSON ST			Amount of Each Disbursement this Period 372.00		
City MADISON	State WI	Zip Code 53715	Transaction ID : SB17.I467		
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type			
Candidate Name			[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. OFFICE MAX			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014		
Mailing Address 1346 PORT WASHINGTON ROAD			Amount of Each Disbursement this Period 14.97		
City GRAFTON	State WI	Zip Code 53024	Transaction ID : SB17.I469		
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type			
Candidate Name			[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).....	391.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. THOMAS GROSS		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 910 COUNTRY CLUB LANE		Amount of Each Disbursement this Period 156.26
City FOND DU LAC	State WI	Zip Code 54935-9702
Purpose of Disbursement IN-KIND CONTRIBUTION	Category/Type	
Candidate Name	Transaction ID : SB17.3004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND: FOOD AND BEVERAGE AT EVENT
State: District:		

Full Name (Last, First, Middle Initial) B. ANNA MCENTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 2700 MONCLARE PL		Amount of Each Disbursement this Period 515.00
City SNELLVILLE	State GA	Zip Code 30078
Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	Category/Type	
Candidate Name	Transaction ID : SB17.I416	
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. ANNA MCENTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 2700 MONCLARE PL		Amount of Each Disbursement this Period 239.44
City SNELLVILLE	State GA	Zip Code 30078
Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	Category/Type	
Candidate Name	Transaction ID : SB17.I422	
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).....	910.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. ANNA MCENTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2700 MONCLARE PL		Amount of Each Disbursement this Period 515.00 Transaction ID : SB17.I439
City SNELLVILLE State GA Zip Code 30078	Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	
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. ANNA MCENTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2700 MONCLARE PL		Amount of Each Disbursement this Period 162.10 Transaction ID : SB17.I451
City SNELLVILLE State GA Zip Code 30078	Purpose of Disbursement MILEAGE REIMBURSEMENT	
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. ANDY POST		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 700 DOUGLAS AVE #20		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.I415
City MINNEAPOLIS State MN Zip Code 55403	Purpose of Disbursement MEDIA CONSULTING	
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).....	1477.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. ANDY POST			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014	
Mailing Address 700 DOUGLAS AVE #20			Amount of Each Disbursement this Period 1750.00	
City MINNEAPOLIS	State MN	Zip Code 55403	Transaction ID : SB17.I427	
Purpose of Disbursement MEDIA CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ANDY POST			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014	
Mailing Address 700 DOUGLAS AVE #20			Amount of Each Disbursement this Period 800.00	
City MINNEAPOLIS	State MN	Zip Code 55403	Transaction ID : SB17.I440	
Purpose of Disbursement MEDIA CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ANDY POST			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014	
Mailing Address 700 DOUGLAS AVE #20			Amount of Each Disbursement this Period 268.83	
City MINNEAPOLIS	State MN	Zip Code 55403	Transaction ID : SB17.I448	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2818.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. BRANDON VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014	
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 3000.00	
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I413	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. BRANDON VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014	
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 750.00	
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I441	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BRANDON VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014	
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 189.72	
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I446	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3939.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. RACHEL VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014	
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 4000.00	
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I412	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. RACHEL VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014	
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 789.10	
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I423	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AIRTRAN			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address P.O. BOX 36647-1CR			Amount of Each Disbursement this Period 636.20	
City DALLAS	State TX	Zip Code 75235	Transaction ID : SB17.I470	
Purpose of Disbursement TRAVEL EXPENSE		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional)	4789.10
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. RACHEL VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014		
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 1000.00		
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I442		
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. RACHEL VERVELDE			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014		
Mailing Address 747 NORTH STAR DR			Amount of Each Disbursement this Period 393.00		
City MADISON	State WI	Zip Code 53718	Transaction ID : SB17.I447		
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014		
Mailing Address 5555 HILTON AVE SUITE 106			Amount of Each Disbursement this Period 100.90		
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SB17.I436		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional)	1493.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 5555 HILTON AVE SUITE 106		Amount of Each Disbursement this Period 144.18 Transaction ID : SB17.I437
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 5555 HILTON AVE SUITE 106		Amount of Each Disbursement this Period 135.53 Transaction ID : SB17.I454
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address 5555 HILTON AVE SUITE 106		Amount of Each Disbursement this Period 88.88 Transaction ID : SB17.I456
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	368.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 5555 HILTON AVE SUITE 106		Amount of Each Disbursement this Period 140.72
City BATON ROUGE	State LA Zip Code 70808	
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/Type	Transaction ID : SB17.I461
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 8401 EXCELSIOR DRIVE #103		Amount of Each Disbursement this Period 1700.00
City MADISON	State WI Zip Code 53717	
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	Transaction ID : SB17.I444
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 8401 EXCELSIOR DRIVE #103		Amount of Each Disbursement this Period 113.13
City MADISON	State WI Zip Code 53717	
Purpose of Disbursement EXPENSE REIMBURSEMENT	Category/Type	Transaction ID : SB17.I445
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1953.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial)
A. AXIOM STRATEGIES

Mailing Address 1251 NW BRIARCLIFF PKWY
SUITE 85

City KANSAS CITY State MO Zip Code 64116

Purpose of Disbursement RESEARCH SERVICES

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
10 / 01 / 2014

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.I424

Category/Type

Full Name (Last, First, Middle Initial)
B. BMO HARRIS BANK

Mailing Address 321 N MAIN ST

City WEST BEND State WI Zip Code 53095

Purpose of Disbursement SERVICE FEE

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
10 / 01 / 2014

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.I476

Category/Type

Full Name (Last, First, Middle Initial)
C. CHARTER COMMUNICATIONS

Mailing Address PO BOX 2981

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement INTERNET

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
10 / 01 / 2014

Amount of Each Disbursement this Period: 137.15

Transaction ID : SB17.I418

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5212.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I431
City TYSONS CORNERS	State VA Zip Code 22182	
Purpose of Disbursement DATABASE SOFTWARE	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 376.10 Transaction ID : SB17.I434
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. GREAT NORTHERN COMMUNITIES		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 845 S MAIN ST SUITE 100		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.I433
City FOND DU LAC	State WI Zip Code 54935	
Purpose of Disbursement OFFICE RENT	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2174.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. NATIONBUILDER		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 448 S HILL ST		Amount of Each Disbursement this Period 99.00
City LOS ANGELES	State CA	
Zip Code 90013	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I458
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. RED PRINT STRATEGY		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 311 S FILLMORE ST		Amount of Each Disbursement this Period 16798.00
City ARLINGTON	State VA	
Zip Code 22204	Purpose of Disbursement MEDIA - TV	Transaction ID : SB17.I420
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. SMART MEDIA GROUP LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 1427 LESLIE AVENUE SUITE 100		Amount of Each Disbursement this Period 37850.00
City ALEXANDRIA	State VA	
Zip Code 22301	Purpose of Disbursement MEDIA - TV	Transaction ID : SB17.I428
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).....	54747.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. SMART MEDIA GROUP LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 1427 LESLIE AVENUE SUITE 100		Amount of Each Disbursement this Period 49080.00
City ALEXANDRIA	State VA Zip Code 22301	
Purpose of Disbursement MEDIA - TV	Candidate Name	Transaction ID : SB17.I453
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 36647		Amount of Each Disbursement this Period 272.10
City DALLAS	State TX Zip Code 75235	
Purpose of Disbursement TRAVEL EXPENSE	Candidate Name	Transaction ID : SB17.I435
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 835 W JOHNSON ST		Amount of Each Disbursement this Period 94.37
City FOND DU LAC	State WI Zip Code 54935	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I425
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	49446.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 835 W JOHNSON ST		Amount of Each Disbursement this Period 10.53
City FOND DU LAC	State WI	
Zip Code 54935	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I460
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. TRAVEL RESERVATION USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 1441 KEARNEY DR		Amount of Each Disbursement this Period 317.74
City NORTH BRUNSWICK	State NJ	
Zip Code 08902	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I457
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. UNIVERSITY CLUB OF MILWAUKEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 924 E WELLS STREET		Amount of Each Disbursement this Period 459.00
City MILWAUKEE	State WI	
Zip Code 53202	Purpose of Disbursement EVENT CATERING	Transaction ID : SB17.I421
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).....	787.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement
Mailing Address 99 W SECOND ST		M M / D D / Y Y Y Y 10 / 01 / 2014
City FOND DU LAC	State WI	Zip Code 55935
Purpose of Disbursement POSTAGE	Category/ Type	Amount of Each Disbursement this Period 196.00
Candidate Name		Transaction ID : SB17.I426
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. US POST OFFICE		Date of Disbursement
Mailing Address 99 W SECOND ST		M M / D D / Y Y Y Y 10 / 10 / 2014
City FOND DU LAC	State WI	Zip Code 55935
Purpose of Disbursement POSTAGE	Category/ Type	Amount of Each Disbursement this Period 147.00
Candidate Name		Transaction ID : SB17.I455
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.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	343.00
TOTAL This Period (last page this line number only).....	136941.60

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

NAME OF COMMITTEE (In Full) **Glenn Grothman for Congress** Transaction ID : **SC/10.4317**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Glenn S. Grothman Primary
 Mailing Address PO Box 1215 General
 Other (specify) ▼

City State ZIP Code
 Fond du Lac WI 54936

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS Date Incurred Date Due Interest Rate Secured:
 M 04 / D 04 / Y 2014 M 12 / D 31 / Y 2014 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7056

Glenn Grothman for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Glenn S. Grothman

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 1215

City State ZIP Code
Fond du Lac WI 54936

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
90000.00	0.00	90000.00

TERMS

Date Incurred: M 07 / D 18 / Y 2014
 Date Due: M 12 / D 31 / Y 2014
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	90000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full) **Glenn Grothman for Congress** Transaction ID : **KML1**

LOAN SOURCE Full Name (Last, First, Middle Initial) Glenn S. Grothman	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 1215		
City Fond du Lac	State WI	ZIP Code 54964

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
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TERMS

Date Incurred M 08 / D 04 / Y 2014	Date Due M 12 / D 01 / Y 2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	30000.00
TOTALS This Period (last page in this line only).....	▶	130000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 84 OF 85
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADAM GIBB	Nature of Debt (Purpose): CAMPAIGN CONSULTING - PRIMARY
Mailing Address 830 EMERSON ST	
City State Zip Code MADISON WI 53715	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : 1018L	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BRANDON VERVELDE	Nature of Debt (Purpose): CAMPAIGN CONSULTING - PRIMARY
Mailing Address 747 N STAR DR	
City State Zip Code MADISON WI 53718	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : 1018N	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RACHEL VERVELDE	Nature of Debt (Purpose): CAMPAIGN CONSULTING - PRIMARY
Mailing Address 747 N STAR DR	
City State Zip Code MADISON WI 53718	

Outstanding Balance Beginning This Period 3000.00	Transaction ID : 1018M	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

1) SUBTOTALS This Period This Page (optional)	7500.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 85 OF 85
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor POINTER MARKETING INC		Nature of Debt (Purpose): FUNDRAISING MAILING - PRIMARY
Mailing Address 7019 STATE ROAD 144N		
City State	Zip Code	
WEST BEND	WI 53090	

Outstanding Balance Beginning This Period	Transaction ID : 10180	
<input type="text" value="5000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="5000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

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		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="12500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="130000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="142500.00"/>