

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Republican Party of Wisconsin

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

2. **FEC IDENTIFICATION NUMBER** C00074450
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2006 through 08 31 2006

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 Reince Priebus

Signature of Treasurer Electronically Filed by Reince Priebus Date 10 19 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		60598.82
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	328287.28									
(c) Total Receipts (from Line 19)	299223.97	1531364.91								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	627511.25	1591963.73								
7. Total Disbursements (from Line 31)	170029.46	1134481.94								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	457481.79	457481.79								
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)	85662.55									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	85954.18	315989.18
(i) Itemized (use Schedule A)	69947.74	648082.72
(ii) Unitemized	155901.92	964071.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1000.00	1000.00
(b) Political Party Committees	12000.00	77900.00
(c) Other Political Committees (such as PACs)	168901.92	1042971.90
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	117000.00	458598.77
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	822.05	12742.54
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	12500.00	17051.70
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	12500.00	17051.70
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	299223.97	1531364.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	286723.97	1514313.21

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1498.71	24605.85
(ii) Non-Federal Share.....	5637.94	92628.06
(b) Other Federal Operating Expenditures.....	85903.15	462881.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	93039.80	580115.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	2855.88
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	245.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	245.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	76989.66	551266.03
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	76989.66	551266.03
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	170029.46	1134481.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	164391.52	1041853.88

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	168901.92	1042971.90
34. Total Contribution Refunds (from Line 28(d))	0.00	245.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	168901.92	1042726.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	87401.86	487486.97
37. Offsets to Operating Expenditures (from Line 15, page 3)	822.05	12742.54
38. Net Operating Expenditures (subtract Line 37 from Line 36)	86579.81	474744.43

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. James Barrett		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2006	
Mailing Address N51 W35427 River Road		Transaction ID: SA11A1.24910	
City State Zip Code Oconomowoc WI 53066	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. James Barry, III		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006	
Mailing Address 1121 N Edison Street		Transaction ID: SA11A1.24913	
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer James T. Barry Co., Inc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Real Estate Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. James Becker		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006	
Mailing Address 5830 N Sunny Point Rd		Transaction ID: SA11A1.24914	
City State Zip Code Milwaukee WI 53209	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Private Investor Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
J. Borden

Mailing Address PO Box 591

City State Zip Code
Janesville WI 53545

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

Name of Employer Occupation
HUF COR, Inc President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: SA11A1.24915

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Cindy Broydrick

Mailing Address 111 E Kilbourn Ste 2060

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2006

Transaction ID: SA11A1.24916

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address P.O. Box 466

City State Zip Code
Waukesha WI 53187

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

Name of Employer Occupation
Century Fence Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: SA11A1.24918

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Barbara Carlson		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address PO Box 477		Transaction ID: SA11A1.24921	
City Iron River	State WI	Zip Code 54847	Amount of Each Receipt this Period 10000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) B. Julie Cayce		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 832 S. Madison St.		Transaction ID: SA11A1.24923	
City Green Bay	State WI	Zip Code 54301	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested L.A. Edlbeck Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested General Manager Aggregate Year-to-Date ▼ 2550.00		

Full Name (Last, First, Middle Initial) C. Dennis Cox		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2006	
Mailing Address 4488 N Oakland		Transaction ID: SA11A1.24927	
City Milwaukee	State WI	Zip Code 53211	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	10300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Walter Dauska		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6	
Mailing Address 378 Shady Drive		Transaction ID: SA11A1.24929	
City State Zip Code Oneida WI 54155	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Green Bay Packaging	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. David Davies		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6	
Mailing Address 700 Waters Edge Rd		Transaction ID: SA11A1.24930	
City State Zip Code Racine WI 53402	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer D W Davies Co	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00		

Full Name (Last, First, Middle Initial) C. Forest County Potawatomi Community		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6	
Mailing Address PO 340		Transaction ID: SA11A1.25075	
City State Zip Code Crandon WI 54520	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Forest County Potawatomi Community Mailing Address PO 340		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6 Transaction ID: SA11A1.25076
City State Zip Code Crandon WI 54520	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00 Contribution
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

B. Full Name (Last, First, Middle Initial) James French Mailing Address 1515 Ridge Rd		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 Transaction ID: SA11A1.24941
City State Zip Code Sheboygan WI 53081	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 Contribution
Name of Employer Occupation J.L. French Corp. President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C. Full Name (Last, First, Middle Initial) Michael Friehe Mailing Address 10556 N Port Washington Road		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6 Transaction ID: SA11A1.24943
City State Zip Code Mequon WI 53092	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 Contribution
Name of Employer Occupation Northwestern Mutual Life Financial Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	5750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Fran Frigo		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address 1245 Outward Ave		Transaction ID: SA11A1.24944	
City State Zip Code De Pere WI 54115	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. David Haskell		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006	
Mailing Address 1255 Lakeside Drive		Transaction ID: SA11A1.24950	
City State Zip Code Elm Grove WI 53122	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Surgeon Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Thomas Hayssen		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2006	
Mailing Address 1111 E Bywater Lane		Transaction ID: SA11A1.24951	
City State Zip Code Milwaukee WI 53217-2839	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Racine Iron & Wire Works Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director Mfg Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Joyce Heinrich		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006	
Mailing Address 1035 Hill St #224		Transaction ID: SA11A1.25249	
City Watertown	State WI	Zip Code 53094	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00		

Full Name (Last, First, Middle Initial) B. Nancy Hernandez		Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2006	
Mailing Address W Wells St. #4A		Transaction ID: SA11A1.24953	
City Milwaukee	State WI	Zip Code 53203	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Roger Hoffman		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006	
Mailing Address 1612 S Golf Glen Unit F		Transaction ID: SA11A1.24954	
City Madison	State WI	Zip Code 53704	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional) ▶	825.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Charles Hyde

Mailing Address 1234 Washington Ave.

City State Zip Code
Oshkosh WI 54901

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2006

Transaction ID: SA11A1.24957

Amount of Each Receipt this Period
60.00

Contribution

B. Full Name (Last, First, Middle Initial)
David Kachel

Mailing Address 513 W Center St

City State Zip Code
Whitewater WI 53190

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

Name of Employer Self Occupation Businessman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2006

Transaction ID: SA11A1.24964

Amount of Each Receipt this Period
200.00

Contribution

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

Mailing Address 1751 Scenic Rd

City State Zip Code
Richfield WI 53076

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 332.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2006

Transaction ID: SA11A1.24966

Amount of Each Receipt this Period
166.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **426.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Mary Kohler		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address PO Box 897		Transaction ID: SA11A1.24967	
City Sheboygan	State WI	Amount of Each Receipt this Period 2500.00	
Zip Code 53082		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Windway Capitol Corp	Occupation Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

B. Full Name (Last, First, Middle Initial) Terry Kohler		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 630 Riverfront Drive		Transaction ID: SA11A1.24968	
City Sheboygan	State WI	Amount of Each Receipt this Period 2500.00	
Zip Code 53082		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Windway Capital Corp	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

C. Full Name (Last, First, Middle Initial) Louis Krikelas		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address Information Requested		Transaction ID: SA11A1.24971	
City Dodgeville	State WI	Amount of Each Receipt this Period 200.00	
Zip Code 53533		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	5200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 / 77
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
George Kummeth

Mailing Address 4324 Knuell Street

City State Zip Code
Manitowoc WI 54220

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

Name of Employer Occupation
Universal Wire & Stamping President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2006

Transaction ID: SA11A1.24975

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Helen Loewi

Mailing Address 9621 North Lake Drive

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
Milwaukee Resistor President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2006

Transaction ID: SA11A1.24976

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address 777 N Prospect

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Super Steel Products Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2006

Transaction ID: SA11A1.24978

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Allan Lund		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2006
Mailing Address 15025 W Beckwith Rd		Transaction ID: SA11A1.24979
City State Zip Code Hayward WI 54843	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Donald Lynch		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006
Mailing Address 1230 E Courtland Pl.		Transaction ID: SA11A1.24980
City State Zip Code Milwaukee WI 53211	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. John MacDonough		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006
Mailing Address 6208 Brumder Drive		Transaction ID: SA11A1.24982
City State Zip Code Hartland WI 53029	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
John MacDonough

Mailing Address 6208 Brumder Drive

City State Zip Code
Hartland WI 53029

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

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2006

Transaction ID: SA11A1.25250

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Kathy MacDonough

Mailing Address 6208 N Brumder Rd

City State Zip Code
Hartland WI 53029

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2006

Transaction ID: SA11A1.24983

Amount of Each Receipt this Period
2500.00

Contribution

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

Mailing Address 6208 N Brumder Rd

City State Zip Code
Hartland WI 53029

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2006

Transaction ID: SA11A1.25251

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Louis Maier		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6	
Mailing Address 9862 N Range Line Rd		Transaction ID: SA11A1.25252	
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) James McDonald		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6	
Mailing Address 4831 Linderman Ave.		Transaction ID: SA11A1.24985	
City State Zip Code Racine WI 53406	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation retired Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Lawrence Moon		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	
Mailing Address 9850 N Courtland Dr		Transaction ID: SA11A1.24990	
City State Zip Code Meequon WI 53092	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Lakeside Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Mfg Manager Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Detlef Moore		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 3704 N Lake Dr		Transaction ID: SA11A1.24991	
City State Zip Code Milwaukee WI 53211		Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Badger Bluegrass Co, Inc Self		Aggregate Year-to-Date ▼ 475.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Detlef Moore		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2006	
Mailing Address 3704 N Lake Dr		Transaction ID: SA11A1.24992	
City State Zip Code Milwaukee WI 53211		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Badger Bluegrass Co, Inc Self		Aggregate Year-to-Date ▼ 625.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Patrick Murphy		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006	
Mailing Address 1525 Rustic Way		Transaction ID: SA11A1.24994	
City State Zip Code Green Bay WI 54313		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Self Employed		Aggregate Year-to-Date ▼ 1100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1375.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Rita Nyffeler		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006	
Mailing Address N8305 Weber Road		Transaction ID: SA11A1.24995	
City State Zip Code East Troy WI 53120-2442	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. John Ogden		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 1840 N Prospect Ave Apt 211		Transaction ID: SA11A1.24998	
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Ogden & Co. Inc Occupation Realtor	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. John Ogden		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 1840 N Prospect Ave Apt 211		Transaction ID: SA11A1.25064	
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Ogden & Co. Inc Occupation Realtor	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Wayne Oldenburg		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 1717 W Civic Dr		Transaction ID: SA11A1.24999	
City Milwaukee	State WI	Zip Code 53209	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Oldenburg Group, Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Oneida Tribe of Indians		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006	
Mailing Address PO Box 365		Transaction ID: SA11A1.25221	
City Oneida	State WI	Zip Code 54155	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00		

Full Name (Last, First, Middle Initial) C. Fred Panzer		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address W6375 Firelane 8		Transaction ID: SA11A1.25065	
City Menasha	State WI	Zip Code 54952	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Radiology Assn of Applet	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	2550.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
William Perez

Mailing Address 1975 SW Montgomery Dr

City Portland State OR Zip Code 97201

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

Name of Employer SC Johnson Wax Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.25006

Amount of Each Receipt this Period
10000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Daniel Peterson

Mailing Address 2821 N Polzin Rd

City Janesville State WI Zip Code 53548

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.25007

Amount of Each Receipt this Period
100.00

Contribution

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

Mailing Address W304 N2362C N Westwind Dr #3C

City Pewaukee State WI Zip Code 53072

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

Name of Employer The Equitable Bank Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.25010

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **10200.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Debbie Rennes

Mailing Address N3522 Riverbend Dr.

City State Zip Code
Peshtigo WI 54157

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: SA11A1.25013

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Tim Rennes

Mailing Address N3522 River Bend Rd

City State Zip Code
Peshtigo WI 54157

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

Name of Employer Rennes Health Care Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: SA11A1.25015

Amount of Each Receipt this Period
5000.00

Contribution

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

Mailing Address 1014 Hillside Ave

City State Zip Code
Madison WI 53705-1117

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

Name of Employer Madison Radiologists Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2006

Transaction ID: SA11A1.25018

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	7250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
John Savage

Mailing Address 1610 N. Prospect #203

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2006

Transaction ID: SA11A1.25024

Amount of Each Receipt this Period
75.00

Contribution

B. Full Name (Last, First, Middle Initial)
Sherry Schultz

Mailing Address 1418 Pleasure Drive

City State Zip Code
Madison WI 53704

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

Name of Employer Occupation
RPW Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1527.65

Date of Receipt
MM / DD / YYYY
08 / 28 / 2006

Transaction ID: SA11A1.25034

Amount of Each Receipt this Period
1527.65

Contribution

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

Mailing Address 7312 Douglas Ave Box 396

City State Zip Code
Racine WI 53402

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

Name of Employer Occupation
Merit Gear Gear Maker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2006

Transaction ID: SA11A1.25035

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1702.65
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Johan Segerdahl		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6	
Mailing Address 601 E Lake Terrace		Transaction ID: SA11A1.25036	
City Glendale	State WI	Zip Code 53217	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. John Sensenbrenner		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6	
Mailing Address 909 East Forest Avenue		Transaction ID: SA11A1.25038	
City Neenah	State WI	Zip Code 54956	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. John Sensenbrenner		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6	
Mailing Address 909 East Forest Avenue		Transaction ID: SA11A1.25039	
City Neenah	State WI	Zip Code 54956	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 535.00		

SUBTOTAL of Receipts This Page (optional) ▶	785.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Joan Stein

Mailing Address 2055 West Dean Road

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: SA11A1.25040

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Frederick Stratton

Mailing Address 9608 N Juniper Circle

City State Zip Code
Mequon WI 53092

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

Name of Employer Occupation
Briggs & Stratton Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2006

Transaction ID: SA11A1.25041

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address 915 Maruknoll Cir

City State Zip Code
Glen Ellyn WI 60137

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
305.53

Date of Receipt
MM / DD / YYYY
08 / 17 / 2006

Transaction ID: SA11A1.25232

Amount of Each Receipt this Period
305.53

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1305.53
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. John Van Hollen		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address Rr 2		Transaction ID: SA11A1.25042	
City Mason	State WI	Amount of Each Receipt this Period 10000.00	
Zip Code 54856		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Northern Lights Manor	Occupation RN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) B. William Ward		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2006	
Mailing Address N3396 County Road G		Transaction ID: SA11A1.25046	
City Fort Atkinson	State WI	Amount of Each Receipt this Period 500.00	
Zip Code 53539-9183		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Larry Weiss		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2006	
Mailing Address 1117 Sweetbriar Lane		Transaction ID: SA11A1.25051	
City Hartland	State WI	Amount of Each Receipt this Period 300.00	
Zip Code 53029		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	10800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 77
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Timothy Wengert

Mailing Address 1220 Ridge Rd

City State Zip Code
Marshfield WI 54449

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: SA11A1.25052

Amount of Each Receipt this Period
35.00

Contribution

B. Full Name (Last, First, Middle Initial)
Greg Wolf

Mailing Address 1559 Fox Ridge Court

City State Zip Code
De Pere WI 54115

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2006

Transaction ID: SA11A1.25053

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	535.00
TOTAL This Period (last page this line number only)	85954.18

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 77
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
CANTOR FOR CONGRESS

Mailing Address P. O. Box 17813

City	State	Zip Code
Richmond	VA	23226

FEC ID number of contributing federal political committee. **C** C00355461

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	6

Transaction ID: SA11B.25073

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 77
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
COMMITTEE FOR THE PRESERVATION OF CAPITALISM (GPC), THE

Mailing Address P.O. Box 65314

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00328468

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11C.25069

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
CONGRESSIONAL MAJORITY COMMITTEE

Mailing Address P. O. BOX 746

City State Zip Code
Bakersfield CA 93302

FEC ID number of contributing federal political committee. **C** C00117721

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: SA11C.25067

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
MARSHALL AND ILSLEY CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 770 N WATER STREET

City State Zip Code
MILWAUKEE WI 53202

FEC ID number of contributing federal political committee. **C** C00170696

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2006

Transaction ID: SA11C.25239

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 77
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. MIDNIGHT SUN POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006	
Mailing Address PO BOX 75181		Transaction ID: SA11C.25242	
City State Zip Code WASHINGTON DC 20013	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00345199	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. RELY ON YOUR BELIEFS FUND		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2006	
Mailing Address 209 Pennsylvania Avenue SE		Transaction ID: SA11C.25071	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00344648	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. TDS Telecom PAC		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006	
Mailing Address PO Box 5158		Transaction ID: SA11C.25244	
City State Zip Code Madison WI 53705	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 77
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Republican Party of Wisconsin
--

Full Name (Last, First, Middle Initial) A. WEPAC		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2006	
Mailing Address 122 C Street NW Suite 840		Transaction ID: SA11C.25245	
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <input type="checkbox"/> C	Contribution		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	12000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 77
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. MICHIGAN REPUBLICAN PARTY		Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2006
Mailing Address 520 Seymour St.		Transaction ID: SA12.25077
City State Zip Code Lansing MI 48933	Amount of Each Receipt this Period 17000.00	
FEC ID number of contributing federal political committee. C C00041160	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 17000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Republican National Committee		Date of Receipt M M / D D / Y Y Y Y Y 08 / 11 / 2006
Mailing Address 310 1st Street SE		Transaction ID: SA12.25226
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 50000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 50000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Republican National Committee		Date of Receipt M M / D D / Y Y Y Y Y 08 / 25 / 2006
Mailing Address 310 1st Street SE		Transaction ID: SA12.25227
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 50000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 100000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	117000.00
TOTAL This Period (last page this line number only) ▶	117000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 77
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
United States Postal Services

Mailing Address PO Box 5066

City	State	Zip Code
Milwaukee	WI	53201-5066

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	6

Transaction ID: SA15.25079

Amount of Each Receipt this Period
697.32

Reimbursements for BMR Mail

SUBTOTAL of Receipts This Page (optional)	▶	697.32
TOTAL This Period (last page this line number only)	▶	697.32

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 35 / 77

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Allied Insurance Center		Transaction ID: SB21B.25094 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 12750 W. North Avenue		Amount of Each Disbursement this Period 3120.50
City Brookfield State WI Zip Code 53005	Purpose of Disbursement Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Applied Research Coordinates		Transaction ID: SB21B.25095 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 2310 St. Bede's Court		Amount of Each Disbursement this Period 1081.07
City Reston State VA Zip Code 20191-1621	Purpose of Disbursement Political Consultant Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Best Buy		Transaction ID: SB21B.25212 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 6
Mailing Address Store#59		Amount of Each Disbursement this Period 1050.67
City Madison State WI Zip Code 53704	Purpose of Disbursement Office supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	4201.57
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 36 / 77

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Broadmoor Hotel		Transaction ID: SB21B.25210 Date of Disbursement MM / DD / YYYY 03 / 23 / 2006
Mailing Address 1 Lake Avenue		Amount of Each Disbursement this Period 289.91
City Colorado Springs State CO Zip Code 80906	Purpose of Disbursement Hotel room Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. CLS Services Inc.		Transaction ID: SB21B.25096 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address N172 South Park Drive		Amount of Each Disbursement this Period 30282.00
City Appleton State WI Zip Code 54914-8404	Purpose of Disbursement Yard Signs Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Dane County Regional Airport		Transaction ID: SB21B.25204 Date of Disbursement MM / DD / YYYY 03 / 13 / 2006
Mailing Address 4000 International Lane		Amount of Each Disbursement this Period 21.00
City Madison State WI Zip Code 53704	Purpose of Disbursement Parking Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	30282.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Doubletree Hotel		Transaction ID: SB21B.25206 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address 31500 Wick Road		Amount of Each Disbursement this Period 381.80
City Romulus State MI Zip Code 48174	[MEMO ITEM]	
Purpose of Disbursement Hotel		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. FLS-DCI		Transaction ID: SB21B.25261 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 2401 W Behrend Drive STE 7		Amount of Each Disbursement this Period 4000.00
City Phoenix State AZ Zip Code 85027	Category/ Type	
Purpose of Disbursement Prospecting phone calls - not FEA		
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. FLS-DCI		Transaction ID: SB21B.25263 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 2401 W Behrend Drive STE 7		Amount of Each Disbursement this Period 4000.00
City Phoenix State AZ Zip Code 85027	Category/ Type	
Purpose of Disbursement Prospecting phone calls - FEA		
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) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. LexisNexis		Transaction ID: SB21B.25100 Date of Disbursement 08 / 15 / 2006	
Mailing Address PO BOX 2314		Amount of Each Disbursement this Period 200.00	
City Carol Stream State IL Zip Code 60132-2314	Purpose of Disbursement Subscription Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James R. Long		Transaction ID: SB21B.25099 Date of Disbursement 08 / 01 / 2006	
Mailing Address 5735 West Spencer Street		Amount of Each Disbursement this Period 1000.00	
City Appleton State WI Zip Code 54914	Purpose of Disbursement Field Office Rent Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. M&I Bank Credit Card Processing Center		Transaction ID: SB21B.25101 Date of Disbursement 08 / 01 / 2006	
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 2370.19	
City Milwaukee State WI Zip Code 53201	Purpose of Disbursement Credit card charges Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3570.19
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.25203 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6	
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 43.56	
City Madison State WI Zip Code 53705	Purpose of Disbursement Bank fee	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.25102 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6	
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 577.48	
City Madison State WI Zip Code 53705	Purpose of Disbursement Credit card processing fee	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.25103 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 167.40	
City Madison State WI Zip Code 53705	Purpose of Disbursement Bank fee	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	744.88
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.25104 Date of Disbursement MM / DD / YYYY 08 / 31 / 2006
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 86.97
City Madison State WI Zip Code 53705	Category/ Type	
Purpose of Disbursement Service Charge		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Maelstrom Solutions Corporation		Transaction ID: SB21B.25105 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 250 N. Sunny Slope STE 300		Amount of Each Disbursement this Period 35.00
City Brookfield State WI Zip Code 53005	Category/ Type	
Purpose of Disbursement Website Design		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Metro/Advantage Cabs		Transaction ID: SB21B.25205 Date of Disbursement MM / DD / YYYY 03 / 13 / 2006
Mailing Address 2240 Deadrick Ave		Amount of Each Disbursement this Period 31.80 [MEMO ITEM]
City Memphis State TN Zip Code 38114	Category/ Type	
Purpose of Disbursement Cab fare		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	121.97
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Milwaukee Journal Sentinel		Transaction ID: SB21B.25213 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6	
Mailing Address PO Box 2929		Amount of Each Disbursement this Period 212.50	
City Milwaukee State WI Zip Code 53201	Purpose of Disbursement Subscription renewal	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Northwest Airlines		Transaction ID: SB21B.25209 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6	
Mailing Address 1 Northwest Rd		Amount of Each Disbursement this Period 278.69	
City Livonia State MI Zip Code 48152-3938	Purpose of Disbursement Airfare	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. Paypal, Inc.		Transaction ID: SB21B.25207 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address #774100, 4100 Solutions Center		Amount of Each Disbursement this Period 19.95	
City Chicago State IL Zip Code 60677-4001	Purpose of Disbursement Credit card processing fee	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Pfister Hotel		Transaction ID: SB21B.25177 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 424 East Wisconsin Ave		Amount of Each Disbursement this Period 1000.00
City Milwaukee State WI Zip Code 53202	Purpose of Disbursement Room rental deposit Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Radisson Hotel LaCrosse		Transaction ID: SB21B.25214 Date of Disbursement MM / DD / YYYY 04 / 10 / 2006
Mailing Address 200 Harborview Plaza		Amount of Each Disbursement this Period 11.14
City LaCrosse State WI Zip Code 54601	Purpose of Disbursement Meal Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Reflections Photography		Transaction ID: SB21B.25180 Date of Disbursement MM / DD / YYYY 08 / 31 / 2006
Mailing Address 631 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1043.75
City Washington State DC Zip Code 20003	Purpose of Disbursement Photos Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2043.75
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. RNC Full Name (Last, First, Middle Initial) Mailing Address 310 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Seminar fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.25208 Date of Disbursement: M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 Amount of Each Disbursement this Period 60.00 [MEMO ITEM]
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B. U.S. Postal Service Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 5066 City Milwaukee State WI Zip Code 53201-5066 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.25179 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00
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C. Unisource Direct Full Name (Last, First, Middle Initial) Mailing Address 925 Harrington Drive City Madison State WI Zip Code 53718 Purpose of Disbursement Finance mailing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.25106 Date of Disbursement: M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00
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SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Unisource Direct		Transaction ID: SB21B.25108 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 3660.00
City Madison State WI Zip Code 53718	Purpose of Disbursement Finance mailing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Unisource Direct		Transaction ID: SB21B.25109 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 1000.00
City Madison State WI Zip Code 53718	Purpose of Disbursement Finance mailing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Unisource Direct		Transaction ID: SB21B.25110 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 1886.11
City Madison State WI Zip Code 53718	Purpose of Disbursement Finance mailing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	6546.11
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Unisource Direct		Transaction ID: SB21B.25111 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 2465.00
City Madison State WI Zip Code 53718		
Purpose of Disbursement Finance Mailing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. VMPS. LLC		Transaction ID: SB21B.25247 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address PO Box 2741		Amount of Each Disbursement this Period 12500.00
City Madison State WI Zip Code 53701		
Purpose of Disbursement Political Consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. VMPS. LLC		Transaction ID: SB21B.25182 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address PO Box 2741		Amount of Each Disbursement this Period 3000.00
City Madison State WI Zip Code 53701		
Purpose of Disbursement Political Consultant Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	17965.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Windway Capital Corp		Transaction ID: SB21B.25113 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 630 Riverfront Drive #200		Amount of Each Disbursement this Period 5000.00
City Sheboygan State WI Zip Code 53082	Purpose of Disbursement List development Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Wisc. Dept of Revenue		Transaction ID: SB21B.25267 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 832.02
City Milwaukee State WI Zip Code 53293	Purpose of Disbursement Payroll tax Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wisc. Dept of Revenue - Sls Tax		Transaction ID: SB21B.25114 Date of Disbursement MM / DD / YYYY 08 / 31 / 2006
Mailing Address PO Box 93389		Amount of Each Disbursement this Period 580.06
City Milwaukee State WI Zip Code 53293	Purpose of Disbursement Sales/Use Tax Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	6412.08
TOTAL This Period (last page this line number only)	85887.55

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. American Funds Service Company		Transaction ID: SB30B.25117																					
Mailing Address PO Box 6164		Date of Disbursement																					
City Indianapolis State IN Zip Code 46206		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	7		2	0	0	6														
Purpose of Disbursement Employee Simple IRA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">897.68</td> </tr> </table>		897.68																			
897.68																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) B. American Funds Service Company		Transaction ID: SB30B.25118																					
Mailing Address PO Box 6164		Date of Disbursement																					
City Indianapolis State IN Zip Code 46206		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	1		2	0	0	6														
Purpose of Disbursement Employee Simple IRA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">932.21</td> </tr> </table>		932.21																			
932.21																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) C. Kimberly Barton		Transaction ID: SB30B.25119																					
Mailing Address N24W30863 Fairway Ct		Date of Disbursement																					
City Pewaukee State WI Zip Code 53072		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	4		2	0	0	6														
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">199.43</td> </tr> </table>		199.43																			
199.43																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)	2029.32
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Ben Gorges		Transaction ID: SB30B.25120 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address N2001 County Road W		Amount of Each Disbursement this Period 416.27
City New London State WI Zip Code 54961	Purpose of Disbursement Mileage Reimbursement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Dudley Bowlby		Transaction ID: SB30B.25121 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 250 Femrite Drive		Amount of Each Disbursement this Period 664.24
City Madison State WI Zip Code 53716	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Dudley Bowlby		Transaction ID: SB30B.25122 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 250 Femrite Drive		Amount of Each Disbursement this Period 771.77
City Madison State WI Zip Code 53716	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1852.28
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Andrew Davis		Transaction ID: SB30B.25123 Date of Disbursement 08 / 01 / 2006	
Mailing Address 827 Michigan Ave		Amount of Each Disbursement this Period 1093.29	
City South Milwaukee State WI Zip Code 53172	Purpose of Disbursement Reimbursement for Supplies	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andrew Davis		Transaction ID: SB30B.25124 Date of Disbursement 08 / 15 / 2006	
Mailing Address 827 Michigan Ave		Amount of Each Disbursement this Period 798.76	
City South Milwaukee State WI Zip Code 53172	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Andrew Davis		Transaction ID: SB30B.25125 Date of Disbursement 08 / 30 / 2006	
Mailing Address 827 Michigan Ave		Amount of Each Disbursement this Period 1491.61	
City South Milwaukee State WI Zip Code 53172	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3383.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Dean Care		Transaction ID: SB30B.25126 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address PO Box 88610		Amount of Each Disbursement this Period 6610.93	
City Milwaukee State WI Zip Code 53288	Purpose of Disbursement Health Insurance	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Robert Delaporte		Transaction ID: SB30B.25129 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6	
Mailing Address 5657 Barbara Dr		Amount of Each Disbursement this Period 52.23	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Equipment Rental Reimbursement	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Robert Delaporte		Transaction ID: SB30B.25127 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6	
Mailing Address 5657 Barbara Dr		Amount of Each Disbursement this Period 2072.63	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	8735.79
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Robert Delaporte		Transaction ID: SB30B.25128 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 5657 Barbara Dr		Amount of Each Disbursement this Period 2072.64
City Fitchburg State WI Zip Code 53711	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Richard Dickie		Transaction ID: SB30B.25130 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period 1070.69
City Madison State WI Zip Code 53703	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Richard Dickie		Transaction ID: SB30B.25131 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period 1067.93
City Madison State WI Zip Code 53703	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4211.26
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Brett Frazier		Transaction ID: SB30B.25132 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006	
Mailing Address 380 W. Washington Ave, #409		Amount of Each Disbursement this Period 416.30	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Brett Frazier		Transaction ID: SB30B.25133 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 380 W. Washington Ave, #409		Amount of Each Disbursement this Period 255.47	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Jason Gammeter		Transaction ID: SB30B.25134 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006	
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period 246.44	
City Wycocena State WI Zip Code 53969	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	918.21
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Jason Gammeter Full Name (Last, First, Middle Initial) Mailing Address 367 East Monroe St City Wycena State WI Zip Code 53969 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.25135 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 428.15 Category/Type
---	--	--

B. Benjamin Gorges Full Name (Last, First, Middle Initial) Mailing Address 716 E Grand Ave #215 City Eau Claire State WI Zip Code 54703 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.25136 Date of Disbursement 08 / 14 / 2006 Amount of Each Disbursement this Period 428.28 Category/Type
--	--	--

C. Guardian Full Name (Last, First, Middle Initial) Mailing Address PO Box 95101 City Chicago State IL Zip Code 60694 Purpose of Disbursement Dental Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.25137 Date of Disbursement 08 / 31 / 2006 Amount of Each Disbursement this Period 1117.14 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1973.57
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Jeff Harvey		Transaction ID: SB30B.25138 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 2937 Fish Hatchery Rd #112		Amount of Each Disbursement this Period 1333.61
City Madison State WI Zip Code 53713	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Jeff Harvey		Transaction ID: SB30B.25139 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 2937 Fish Hatchery Rd #112		Amount of Each Disbursement this Period 1757.99
City Madison State WI Zip Code 53713	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Donna Heimbach		Transaction ID: SB30B.25140 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 3002 Dianne Drive		Amount of Each Disbursement this Period 485.37
City Middleton State WI Zip Code 53562	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3576.97
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Donna Heimbach Full Name (Last, First, Middle Initial) Mailing Address 3002 Dianne Drive City Middleton State WI Zip Code 53562 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB30B.25141 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 438.88 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Alexandria Higgins Full Name (Last, First, Middle Initial) Mailing Address 328 Ash Street City Sauk City State WI Zip Code 53583 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB30B.25188 Date of Disbursement 08 / 15 / 2006 Amount of Each Disbursement this Period 1495.57 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Alexandria Higgins Full Name (Last, First, Middle Initial) Mailing Address 328 Ash Street City Sauk City State WI Zip Code 53583 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB30B.25190 Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 66.61 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2001.06
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Alexandria Higgins		Transaction ID: SB30B.25191 Date of Disbursement 08 / 30 / 2006	
Mailing Address 328 Ash Street		Amount of Each Disbursement this Period 1259.10	
City Sauk City	State WI	Zip Code 53583	
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. IRS		Transaction ID: SB30B.25184 Date of Disbursement 08 / 16 / 2006	
Mailing Address Payment Center		Amount of Each Disbursement this Period 261.18	
City Kansas City	State MO	Zip Code 64999	
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. IRS		Transaction ID: SB30B.25185 Date of Disbursement 08 / 16 / 2006	
Mailing Address Payment Center		Amount of Each Disbursement this Period 10652.85	
City Kansas City	State MO	Zip Code 64999	
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12173.13
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Kimberly Jorns		Transaction ID: SB30B.25143 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period 1396.23
City De Pere State WI Zip Code 54115	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Brian Kind		Transaction ID: SB30B.25144 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period 1495.33
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Brian Kind		Transaction ID: SB30B.25145 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period 1495.32
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4386.88
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Jill Latham		Transaction ID: SB30B.25146 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 5550 Caddis Bend #405		Amount of Each Disbursement this Period 1458.28
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Jill Latham		Transaction ID: SB30B.25147 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 5550 Caddis Bend #405		Amount of Each Disbursement this Period 1399.16
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Larry Loomis		Transaction ID: SB30B.25148 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period 409.53
City Madison State WI Zip Code 53719	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3266.97
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Larry Loomis		Transaction ID: SB30B.25149 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period 523.75
City Madison State WI Zip Code 53719	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ryan Mahoney		Transaction ID: SB30B.25150 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period 375.30
City Bethesda State MD Zip Code 20817	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ryan Mahoney		Transaction ID: SB30B.25151 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period 339.63
City Bethesda State MD Zip Code 20817	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1238.68
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Thomas Mooney		Transaction ID: SB30B.25152 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 163 Avon St. Apt 4		Amount of Each Disbursement this Period 978.00
City La Crosse State WI Zip Code 54603	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Thomas Mooney		Transaction ID: SB30B.25153 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 163 Avon St. Apt 4		Amount of Each Disbursement this Period 1144.75
City La Crosse State WI Zip Code 54603	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeffery Noltner		Transaction ID: SB30B.25154 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period 49.64
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2172.39
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Jeffery Noltner		Transaction ID: SB30B.25155 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period 59.19
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Leslie Oehmen		Transaction ID: SB30B.25162 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 5018 Paulson Court #3		Amount of Each Disbursement this Period 1092.29
City McFarland State WI Zip Code 53558	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sherrie Osegard		Transaction ID: SB30B.25156 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period 926.65
City Madison State WI Zip Code 53719	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2078.13
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Sherrie Osegard		Transaction ID: SB30B.25157 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period 926.65	
City Madison State WI Zip Code 53719	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Scott Poole		Transaction ID: SB30B.25158 Date of Disbursement MM / DD / YYYY 08 / 14 / 2006	
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period 471.94	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Scott Poole		Transaction ID: SB30B.25159 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period 605.28	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2003.87
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Karoline Rezin		Transaction ID: SB30B.25197 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1836 Gruman		Amount of Each Disbursement this Period 417.86
City Tomah State WI Zip Code 54660	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Daniel Romportl		Transaction ID: SB30B.25200 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 841 Skibborean Way		Amount of Each Disbursement this Period 822.61
City Hartford State WI Zip Code 53027	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) James Sanders		Transaction ID: SB30B.25160 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period 614.52
City Madison State WI Zip Code 53704	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1854.99
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. James Sanders		Transaction ID: SB30B.25161 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period 652.30
City Madison State WI Zip Code 53704	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rick Wiley		Transaction ID: SB30B.25164 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period 2527.32
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Rick Wiley		Transaction ID: SB30B.25165 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period 2051.06
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5230.68
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Joshua Wilson		Transaction ID: SB30B.25166 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period 451.83
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Joshua Wilson		Transaction ID: SB30B.25167 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period 550.50
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wisc. Dept of Revenue		Transaction ID: SB30B.25168 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 2137.00
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3139.33
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Wisc. Dept of Revenue		Transaction ID: SB30B.25169 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 53.07
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Wisc. Dept of Revenue		Transaction ID: SB30B.25170 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 1469.81
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wisc. Dept of Revenue		Transaction ID: SB30B.25171 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 27.18
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll Taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1550.06
TOTAL This Period (last page this line number only) ▶	76557.69

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 68 / 77 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: right;">110000.00</div>	Cumulative Payment To Date <div style="border: 1px solid black; padding: 2px; text-align: right;">69000.00</div>	Balance Outstanding at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">41000.00</div>
---	---	--

TERMS

Date Incurred <div style="display: flex; justify-content: space-between;">M MD DY Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">0 1 0 9 2 0 0 2</div>	Date Due <div style="border: 1px solid black; padding: 2px;">04/30/02</div>	Interest Rate <div style="border: 1px solid black; padding: 2px;">5.75</div> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	---	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100%; height: 15px;"></div>

SUBTOTALS This Period This Page (optional)	<div style="border: 1px solid black; padding: 2px; text-align: right;">41000.00</div>
TOTALS This Period (last page in this line only)	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
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 3X)

LOANS

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

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

LOAN SOURCE Full Name (Last, First, Middle Initial)

M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI ZIP Code 53705

Election:

Primary

General

Other (specify)

Table with 3 columns: Original Amount of Loan (34000.00), Cumulative Payment To Date (0.00), Balance Outstanding at Close of This Period (34000.00)

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM 12

DD 31

YYYYY 2003

5.00 % (apr)

Yes No

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

Table with 4 columns: Full Name (Last, First, Middle Initial), Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, Amount Guaranteed Outstanding

Summary table with 2 columns: Description (SUBTOTALS, TOTALS) and Amount (34000.00, 75000.00)

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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 70 / 77	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS-DCI	Nature of Debt (Purpose): prospecting calls - not FEA
Mailing Address 2401 W Behrend Drive STE 7	
City State ZIP Code Phoenix AZ 85027	

Outstanding Balance Beginning This Period	Transaction ID: SD10.24858	
18662.55		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	8000.00	10662.55

1) SUBTOTALS This Period This Page (optional).....	10662.55
2) TOTALS This Period (last page this line number only).....	10662.55
3) TOTALS 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 H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

NAME OF ACCOUNT Republican Party of WI - State Comm.	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 12500.00
--	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	12500.00	Transaction ID: H3.25877
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	12500.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	12500.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 85460			Allocated Activity or Event Year-To-Date 113229.89		
City Louisville	State KY	Zip Code 40285	Date MM / DD / YYYY 08 / 01 / 2006		
Purpose of Disbursement: Postage			Transaction ID: H4.25173		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
657.85		2474.78		3132.63

B. Full Name (Last, First, Middle Initial) Capital Newspapers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8759			Allocated Activity or Event Year-To-Date 113608.69		
City Madison	State WI	Zip Code 53708	Date MM / DD / YYYY 08 / 15 / 2006		
Purpose of Disbursement: Subscription renewal			Transaction ID: H4.25082		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.55		299.25		378.80

C. Full Name (Last, First, Middle Initial) CMS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 628306			Allocated Activity or Event Year-To-Date 114106.69		
City Middleton	State WI	Zip Code 53562	Date MM / DD / YYYY 08 / 15 / 2006		
Purpose of Disbursement: Cleaning service			Transaction ID: H4.25083		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.58		393.42		498.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
841.98		3167.45		4009.43

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Coca-Cola Bottling Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 86			Allocated Activity or Event Year-To-Date 114217.30	
City	State	Zip Code	Category/ Type	
Minneapolis	MN	55486		
Purpose of Disbursement: Office Soda			Date M M / D D / Y Y Y Y 08 / 15 / 2006	
Activity or Event Identifier: Administrative			Transaction ID: H4.25084	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.23		87.38		110.61

B. Full Name (Last, First, Middle Initial) FedEx			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1140			Allocated Activity or Event Year-To-Date 114237.39	
City	State	Zip Code	Category/ Type	
Memphis	TN	38101		
Purpose of Disbursement: Shipping - not FEA			Date M M / D D / Y Y Y Y 08 / 15 / 2006	
Activity or Event Identifier: Administrative			Transaction ID: H4.25085	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.22		15.87		20.09

C. Full Name (Last, First, Middle Initial) J & B Lawn Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3554 Lake Farm Rd			Allocated Activity or Event Year-To-Date 114417.80	
City	State	Zip Code	Category/ Type	
Madison	WI	53711		
Purpose of Disbursement: Lawn care			Date M M / D D / Y Y Y Y 08 / 15 / 2006	
Activity or Event Identifier: Administrative			Transaction ID: H4.25086	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.89		142.52		180.41

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.34		245.77		311.11

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Kramer Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5515 Catfish Court			Allocated Activity or Event Year-To-Date 114470.47		
City Wauwaukee	State WI	Zip Code 53597	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Printing - not FEA			Transaction ID: H4.25087		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.06		41.61		52.67

B. Full Name (Last, First, Middle Initial) Neenah Springs			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9			Allocated Activity or Event Year-To-Date 114501.42		
City Oxford	State WI	Zip Code 53952	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Bottled water			Transaction ID: H4.25088		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.50		24.45		30.95

C. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9027			Allocated Activity or Event Year-To-Date 114586.13		
City Des Moines	State IA	Zip Code 50368	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office supplies			Transaction ID: H4.25089		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.79		66.92		84.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.35		132.98		168.33

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Office Max

Mailing Address
2420 East Springs Dr

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:
Office Supplies

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

114700.60

Activity or Event Identifier:
Administrative

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	6

Transaction ID: H4.25090

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.04		90.43		114.47

B. Full Name (Last, First, Middle Initial)
Service Specialists Inc

Mailing Address
PO Box 160

City	State	Zip Code
Sun Prairie	WI	53590

Purpose of Disbursement:
Building Maintenance

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115506.73

Activity or Event Identifier:
Administrative

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	6

Transaction ID: H4.25091

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.29		636.84		806.13

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

Mailing Address
PO Box 9001505

City	State	Zip Code
Louisville	KY	40290

Purpose of Disbursement:
Rubbish removal

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115615.48

Activity or Event Identifier:
Administrative

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	6

Transaction ID: H4.25092

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.84		85.91		108.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.17		813.18		1029.35

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Pitney Bowes Credit Corp

Mailing Address
PO Box 85460

City State Zip Code
Louisville KY 40285

Purpose of Disbursement:
Supplies

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115864.94

Date 08 / 15 / 2006

Transaction ID: H4.25172

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.39		197.07		249.46

B. Full Name (Last, First, Middle Initial)
WE Energies

Mailing Address
231 W Michigan Street

City State Zip Code
Milwaukee WI 53203

Purpose of Disbursement:
Utility Bill

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117233.91

Date 08 / 31 / 2006

Transaction ID: H4.25093

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.48		1081.49		1368.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
339.87		1278.56		1618.43

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1498.71	5637.94	7136.65

Image# 26940492152

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit
