

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street)

148 East Johnson Street

Check if different  
than previously  
reported. (ACC)

Madison

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00074450

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☒ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ 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 (12S)

Election on

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

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

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2020

through

M M M / D D D / Y Y Y Y Y Y  
01 31 2020

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

Westrate, Brian, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Westrate, Brian, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
03 20 2020

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2020

To:

M M	/	D D	/	Y Y Y Y Y
01		31		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5">767427.77</td></tr></table>	767427.77				
Y	Y	Y	Y	Y													
2020																	
767427.77																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">767427.77</td></tr></table>	767427.77															
767427.77																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">154130.43</td></tr></table>	154130.43					<table><tr><td colspan="5">154130.43</td></tr></table>	154130.43									
154130.43																	
154130.43																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">921558.20</td></tr></table>	921558.20					<table><tr><td colspan="5">921558.20</td></tr></table>	921558.20									
921558.20																	
921558.20																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">197864.95</td></tr></table>	197864.95					<table><tr><td colspan="5">197864.95</td></tr></table>	197864.95									
197864.95																	
197864.95																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">723693.25</td></tr></table>	723693.25					<table><tr><td colspan="5">723693.25</td></tr></table>	723693.25									
723693.25																	
723693.25																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">10308.08</td></tr></table>	10308.08															
10308.08																	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01	/	01	/	2020

To:

M M	/	D D	/	Y Y Y Y
01	/	31	/	2020

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

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

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

51212.82

51212.82

(ii) Unitemized .....

65820.32

65820.32

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

117033.14

117033.14

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

117033.14

117033.14

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 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).....

958.90

958.90

## 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) .....

36138.39

36138.39

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

36138.39

36138.39

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

154130.43

154130.43

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

117992.04

117992.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	14319.75	14319.75
(ii) Non-Federal Share.....	36822.21	36822.21
(b) Other Federal Operating Expenditures .....	74296.30	74296.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	125438.26	125438.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	72426.69	72426.69
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	72426.69	72426.69
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	197864.95	197864.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	161042.74	161042.74

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	117033.14	117033.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	117033.14	117033.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	88616.05	88616.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	958.90	958.90
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	87657.15	87657.15

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XA  
Transaction ID :

REPORT AMENDED TO CORRECT DUPLICATE RECEIPT TRANSACTIONS AND ERRONEOUS EXPENSE  
TRANSACTION FROM THE CLOSE OF THE REPORTING PERIOD.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 87

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. ARBURY, KRISS, A., ,**

Mailing Address 745 S MERIDIAN ROAD

City  
MIDLAND

State  
MI

Zip Code  
48640-7831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081617

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. BENZ, ELIZABETH, , ,**

Mailing Address 715 NORTH 79TH STREET

City  
WAUWATOSA

State  
WI

Zip Code  
53213-3401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NETWORK HEALTH

Occupation (for Individual)  
GOVERNMENT RELATIONS AND PR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 27 / 2020

Transaction ID : SA11A.1081252

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. BLESER, HELEN, A., MRS,**

Mailing Address 1804 30TH STREET

City  
TWO RIVERS

State  
WI

Zip Code  
54241-2020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081697

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

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

1400.00

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. BOLZ, ANNE, W., MRS.,**

Mailing Address 345 W MAIN ST

City  
MADISON

State  
WI

Zip Code  
53703-3114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 13 / 2020

Transaction ID : SA11A.1080984

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. CARAWAY, JAMES, T., MR.,**

Mailing Address 9364 N LAKE DRIVE

City  
BAYSIDE

State  
WI

Zip Code  
53217-1446

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 02 / 2020

Transaction ID : SA11A.1080567

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. COBURN, RONALD, O., JR.**

Mailing Address 1552 JESSE LANE

City  
GOLDEN

State  
CO

Zip Code  
80403-8068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.1080852

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1500.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. CONANT, DAVID, M., ,**

Mailing Address 20322 SW ACACIA STREET, STE 100

City  
NEWPORT BEACH

State  
CA

Zip Code  
92660-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONANT AUTOMOTIVE RESOURCES

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 03 / 2020

**Transaction ID : SA11A.1080658**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. COURI, JUDITH, M., ,**

Mailing Address 1215 SEITZ DRIVE

City  
WAUKESHA

State  
WI

Zip Code  
53186-6745

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 13 / 2020

**Transaction ID : SA11A.1080992**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. DIPPEL, RANDALL, L., ,**

Mailing Address N4938 COUNTY ROAD U

City  
GLENBEULAH

State  
WI

Zip Code  
53023-1720

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 21 / 2020

**Transaction ID : SA11A.1081170**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

2250.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. DRABOWICZ, JUSTIN, S., ,

Mailing Address 1926 HAWKS RIDGE DRIVE, APT. 308

City  
VERONAState  
WIZip Code  
53593-8509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2020

Transaction ID : SA11A.1081263

Amount of Each Receipt this Period

375.00

☐ Memo Item  
CONTRIBUTION

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

B. DROZDOWICZ, DOUGLAS, , ,

Mailing Address 1111 WOODBRIDGE TRAIL

City

WAUNAKEE

State

WI

Zip Code

53597-2625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2020

Transaction ID : SA11A.1081262

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. FEDLER, RONALD, G., ,

Mailing Address 3291 HUNTER HOLLOW ROAD

City

DODGEVILLE

State

WI

Zip Code

53533-8839

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GOLDLEAF REALTY

Occupation (for Individual)

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2020

Transaction ID : SA11A.1081260

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1625.00

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

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

FOR LINE NUMBER: PAGE 11 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. GORDON, LEO, D., ,**

Mailing Address P.O. BOX 242

City  
TOMAH

State  
WI

Zip Code  
54660-0242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOSEPH MILLER COMPANY

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2020

**Transaction ID : SA11A.1082086**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. GRIFFIN, JAMES, T., ,**

Mailing Address 1601 E JUNIPER WAY

City  
HARTLAND

State  
WI

Zip Code  
53029-8670

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GRIFFIN AUTO GROUP

Occupation (for Individual)  
CAR DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2020

**Transaction ID : SA11A.1081936**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. GRIFFIN, JAMES, T., ,**

Mailing Address 1601 E JUNIPER WAY

City  
HARTLAND

State  
WI

Zip Code  
53029-8670

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GRIFFIN AUTO GROUP

Occupation (for Individual)  
CAR DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2020

**Transaction ID : SA11A.1081937**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 87  
(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**

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

**A. GROHNE, DAVID, F., ,**

Mailing Address 5750 MIDNIGHT PASS ROAD, BLDG E, U

City  
SARASOTAState  
FLZip Code  
34242-3011FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	D D	Y Y Y Y
01	21	2020

Transaction ID : SA11A.1081164

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. HAWLEY, MATTHEW, , ,**

Mailing Address 137 E WILSON STREET, UNIT 1113

City  
MADISONState  
WIZip Code  
53703-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	27	2020

Transaction ID : SA11A.1081261

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. HEIMANN, JAMES, , ,**

Mailing Address 620 S LAKESHORE DRIVE

City  
LAKE GENEVAState  
WIZip Code  
53147-2125FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
01	03	2020

Transaction ID : SA11A.1080589

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

6250.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. HOGAN, MARK, R., ,

Mailing Address 2510 N 90TH STREET

City  
WAUWATOSAState  
WIZip Code  
53226-1812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BMO HARRIS BANKOccupation (for Individual)  
SENIOR ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081785

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

B. JOHNSTON, JOSHUA, R., ,

Mailing Address N7042 PEDRETTI ST

City  
HOLMENState  
WIZip Code  
54636-4407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GUNDERSON HEALTHOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.1080858

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

C. KALSCHEUR, JOYCE, , ,

Mailing Address 401 WILD INDIGO LANE

City  
MADISONState  
WIZip Code  
53717-2148FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081843

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

1800.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. KING, HARVEY, , ,

Mailing Address 11 AALAPAPA PLACE

City  
KAILUAState  
HIZip Code  
96734-3118FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.1080883

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

B. KRAMER, WILLIAM, A., ,

Mailing Address 2626 HOWELL STREET, 10TH FLOOR

City  
DALLASState  
TXZip Code  
75204-4064FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REPUBLIC TITLE OF TEXASOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.1080821

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

C. KROHN, KEITH, D., ,

Mailing Address W11446 RAUBE ROAD

City  
BRANDONState  
WIZip Code  
53919-9529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2020

Transaction ID : SA11A.1082096

Amount of Each Receipt this Period

500.00

☐ Memo Item  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 87

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. KUEHNE, CARL, W., ,**

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City  
DE PERE

State  
WI

Zip Code  
54115-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CK HOLDINGS LLC

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 23 / 2020

Transaction ID : SA11A.1081220

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**B. LAMP, BAILEY , , ,**

Mailing Address 606 TRAVELER LANE

City  
MADISON

State  
WI

Zip Code  
53718-3140

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FEDLER LAMP & ASSOC

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.82

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 16 / 2020

Transaction ID : SA11A.1083504

Amount of Each Receipt this Period

577.82

☐ Memo Item  
IN-KIND CONTRIBUTION

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

**C. LEEDLE, JOSEPH, , MR.,**

Mailing Address N879 STATE RD 120

City  
LAKE GENEVA

State  
WI

Zip Code  
53147-4224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SNUDDEN FARMS

Occupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 29 / 2020

Transaction ID : SA11A.1081516

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1327.82

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

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

FOR LINE NUMBER: PAGE 16 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. MACK, JOHN, M., , DR.

Mailing Address 18685 ELM TERRACE DRIVE

City  
BROOKFIELDState  
WIZip Code  
53045-4912FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081622

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

B. NONN, ADAM, J., ,

Mailing Address 4937 AUGUST DRIVE

City  
MIDDLETONState  
WIZip Code  
53562-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONN'S FLOORINGOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2020

Transaction ID : SA11A.1081265

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. PADDOCK, SAMUEL, E., ,

Mailing Address 1700 S RIVER ROAD, APT 344

City  
JANESVILLEState  
WIZip Code  
53546-4505FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 29 / 2020

Transaction ID : SA11A.1081512

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

700.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. PAYNE, STANLEY, G., ,**

Mailing Address 6205 MINERAL POINT ROAD  
APT 201

City  
MADISON

State  
WI

Zip Code  
53705-4577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 29 / 2020

Transaction ID : SA11A.1081454

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

**B. POLLOCK, THOMAS, J., ,**

Mailing Address 3931 WHITEFISH BAY ROAD

City

STURGEON BAY

State

WI

Zip Code

54235-9575

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2020

Transaction ID : SA11A.1082013

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. PRATER, ANTHONY, L., ,**

Mailing Address 3278 WATERLEAF LN

City

HARTLAND

State

WI

Zip Code

53029-8334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081675

Amount of Each Receipt this Period

160.00

☐ Memo Item  
CONTRIBUTION

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

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

1460.00

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

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

FOR LINE NUMBER: PAGE 18 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. REED, THOMAS, G., ,

Mailing Address 5730 WYANDOTTE STREET

City  
KANSAS CITYState  
MOZip Code  
64113-1220FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2020

Transaction ID : SA11A.1081755

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

B. RULEMAN, C. ALLAN, , , JR.

Mailing Address 4255 GWYNNE ROAD

City  
MEMPHISState  
TNZip Code  
38117-3003FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 14 / 2020

Transaction ID : SA11A.1081009

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

C. SCHEURELL, JAMES, , ,

Mailing Address 904 FAIRVIEW AVENUE

City  
SOUTH MILWAUKEEState  
WIZip Code  
53172-1720FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 03 / 2020

Transaction ID : SA11A.1080799

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. SCHMITZ, ALAN, D., ,**

Mailing Address 6648 WALTERS DRIVE

City  
WEST BEND

State  
WI

Zip Code  
53090-9378

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 03 / 2020

**Transaction ID : SA11A.1080590**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. SCHNEEBECK, ROBERT, W., ,**

Mailing Address 741 N MANASOTA KEY ROAD

City  
ENGLEWOOD

State  
FL

Zip Code  
34223-9758

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STRATEGIC PROGRAM MANAGEMENT

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2020

**Transaction ID : SA11A.1081760**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

**C. SELLIN, LINDA, , ,**

Mailing Address 215 VALLEY RIDGE DRIE

City  
SUN PRAIRIE

State  
WI

Zip Code  
53590-3428

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2020

**Transaction ID : SA11A.1081623**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

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

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

600.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. SMITH, HAROLD, B., ,**

Mailing Address 120 VIA DEL LAGO

City  
PALM BEACH

State  
FL

Zip Code  
33480-4917

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 03 / 2020

Transaction ID : SA11A.1080591

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

**B. SPAIN, CHARLES, , ,**

Mailing Address 620 N LAKE BOULEVARD

City  
MAHOPAC

State  
NY

Zip Code  
10541-1775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 17 / 2020

Transaction ID : SA11A.1081096

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. STELLRECHT, GREGORY, , ,**

Mailing Address P.O. BOX 664

City  
ONALASKA

State  
WI

Zip Code  
54650-0664

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEAVER BUILDERS SUPPLY IN

Occupation (for Individual)  
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2020

Transaction ID : SA11A.1081991

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

10500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. STEVENSON, LAUREL, K., ,**

Mailing Address 1200 CLEARBRUSH LANE

City  
ALEDO

State  
TX

Zip Code  
76008-3815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 07 / 2020

Transaction ID : SA11A.1080930

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. TERRANOVA, JEFFREY, B., ,**

Mailing Address PO BOX 1480

City  
MESILLA

State  
NM

Zip Code  
88046-1480

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROCKY AEVOS VENTURES

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 14 / 2020

Transaction ID : SA11A.1081040

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**C. WAGNER, SUSAN, , MRS.,**

Mailing Address 5531 HIGHWAY 38

City  
FRANKSVILLE

State  
WI

Zip Code  
53126-9313

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2020

Transaction ID : SA11A.1081938

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 87  
(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

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

**A. WALKER, WILLARD, T., , JR.**

Mailing Address 2400 W FAIRY CHASM ROAD

City  
RIVER HILLSState  
WIZip Code  
53217-1512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WT WALKER GROUPOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	30	2020

Transaction ID : SA11A.1081777

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. WIESER, DANIEL, J., ,**

Mailing Address W3322 390TH AVENUE

City  
MAIDEN ROCKState  
WIZip Code  
54750-8005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WIESER CONCRETE PRODUCTS INCOccupation (for Individual)  
CORP SEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	D D	Y Y Y Y
01	03	2020

Transaction ID : SA11A.1080588

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. YOUNG, FRED, M., , JR.**

Mailing Address 3201 MICHIGAN BOULEVARD

City  
RACINEState  
WIZip Code  
53402-3819FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M	D D	Y Y Y Y
01	27	2020

Transaction ID : SA11A.1081268

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

15250.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. ZHANG, MING, LUAN, ,**

Mailing Address 1902 W COURT STREET

City  
JANESVILLE

State  
WI

Zip Code  
53548-3418

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**01 / 30 / 2020**

**Transaction ID : SA11A.1081805**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

**B. WINRED**

Mailing Address 1776 WILSON BOULEVARD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209-2515

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4712.00

Date of Receipt

**01 / 17 / 2020**

**Transaction ID : SA11C.1081101578**

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

**C. JOSEPH, CAROL, , ,**

Mailing Address 4490 HARBOR VILLAGE DRIVE

City  
OMRO

State  
WI

Zip Code  
54963-9499

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**01 / 17 / 2020**

**Transaction ID : SA11A.1081118**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 24 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

## **A. WINRED**

Mailing Address 1776 WILSON BOULEVARD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209-2515

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4712.00

Date of Receipt

**01** / **22** / **2020**

**Transaction ID : SA11C.1081210657**

Amount of Each Receipt this Period

250.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

## **B. ASPINWALL, PAUL, C., ,**

Mailing Address 14 QUAIL RIDGE DRIVE

City

MADISON

State

WI

Zip Code

53717-1071

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**01** / **22** / **2020**

**Transaction ID : SA11A.1081213**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

## **C. WINRED**

Mailing Address 1776 WILSON BOULEVARD  
SUITE 530

City

ARLINGTON

State

VA

Zip Code

22209-2515

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4712.00

Date of Receipt

**01** / **22** / **2020**

**Transaction ID : SA11C.1081210661**

Amount of Each Receipt this Period

750.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

250.00



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

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

FOR LINE NUMBER: PAGE 25 OF 87  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. QUEIROLO, ANDREW, , ,**

Mailing Address **W8253 EAGLE DRIVE**

City  
**OCFORD**

State  
**WI**

Zip Code  
**53952-9145**

FEC ID number of contributing  
federal political committee.

**C**

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

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**750.00**

Date of Receipt

**01 / 22 / 2020**

**Transaction ID : SA11A.1081217**

Amount of Each Receipt this Period

**750.00**

☐ Memo Item  
CONTRIBUTION

**EARMARKED FROM WINRED**

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

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

**750.00**

**51212.82**

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

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

FOR LINE NUMBER: PAGE 26 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

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

**A. KARST, DAVID, A., JR.**

Mailing Address 11961 WEST WHITAKER AVENUE

City  
GREENFIELD

State  
WI

Zip Code  
53228-2472

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.50

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.1080816

Amount of Each Receipt this Period

341.50

☐ Memo Item

REFUND FOR PAYROLL OVERPAYMENT

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

**B. TRUEBLOOD, NATHANIEL, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISON

State  
WI

Zip Code  
53703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.40

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 02 / 2020

Transaction ID : SA15.30867

Amount of Each Receipt this Period

212.40

☐ Memo Item

REFUND FOR PAYROLL OVERPAYMENT

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

**C. WOJCIK, COLLIN, J., ,**

Mailing Address 1746 HANCOCK LANE

City  
JANESVILLE

State  
WI

Zip Code  
53545-0908

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2020

Transaction ID : SA11A.1080820

Amount of Each Receipt this Period

340.00

☐ Memo Item

REFUND FOR PAYROLL OVERPAYMENT

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

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

893.90

893.90

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

PAGE 27 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. LAMP, BAILEY , , ,

Date of Disbursement

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

Mailing Address 606 TRAVELER LANE

City  
MADISONState  
WIZip Code  
53718-3140Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10835

Amount of Each Disbursement this Period

577.82

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. ADVANTAGE DIRECT

Date of Disbursement

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

Mailing Address 6609 WILLOW PARK DRIVE

City  
NAPLESState  
FLZip Code  
34109Purpose of Disbursement  
MOBILE APP

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.I30937

Amount of Each Disbursement this Period

5318.28

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. ADVANTAGE DIRECT

Date of Disbursement

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

Mailing Address 6609 WILLOW PARK DRIVE

City  
NAPLESState  
FLZip Code  
34109Purpose of Disbursement  
MOBILE APP

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

11000.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

16896.10

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

PAGE 28 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ALLEGRA**

Mailing Address 2 E MIFFLIN STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PRINTING - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2020

FEC Identification Number

C

Transaction ID : SB21B.I3094I

Amount of Each Disbursement this Period

365.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address P.O. BOX 6164

City  
INDIANAPOLISState  
INZip Code  
46206-6164Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2020

FEC Identification Number

C

Transaction ID : SB21B.I3093I

Amount of Each Disbursement this Period

1078.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		03		2020

FEC Identification Number

C

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

15.88

☐ Memo Item

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

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

1459.11

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

PAGE 29 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3095'

Amount of Each Disbursement this Period

304.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I30952

Amount of Each Disbursement this Period

12.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

13.80

☐ Memo Item

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

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

330.65

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

PAGE 30 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

22.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

2.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

9.30

☐ Memo Item

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

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

33.72

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

PAGE 31 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

 2.40☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

 15.09☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3095

Amount of Each Disbursement this Period

 3.78☐ Memo Item

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

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

 21.27

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

PAGE 32 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I30961

Amount of Each Disbursement this Period

37.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I30961

Amount of Each Disbursement this Period

55.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I30961

Amount of Each Disbursement this Period

23.28

☐ Memo Item

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

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

116.30



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

PAGE 33 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3096

Amount of Each Disbursement this Period

 41.15☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address P.O. BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3096

Amount of Each Disbursement this Period

 50.93☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address P.O. BOX 5700

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3094

Amount of Each Disbursement this Period

 128.40☐ Memo Item

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

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

 220.48

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

PAGE 34 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address P.O. BOX 5700

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3094

Amount of Each Disbursement this Period

49.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I31025

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address P.O. BOX 5700

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3094

Amount of Each Disbursement this Period

148.89

☐ Memo Item

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

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

197.89

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

PAGE 35 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address P.O. BOX 5700

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3094

Amount of Each Disbursement this Period

49.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3104C

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SIDEKICK**

Mailing Address 1550 OLD ANNETTA

City  
ALEDOState  
TXZip Code  
76008Purpose of Disbursement  
DATA MANAGEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

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

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

3049.00

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

PAGE 36 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CLOCKWORK SYSTEMS**

Mailing Address 6001 GLOSTER ROAD

City  
BETHESDAState  
MDZip Code  
20816Purpose of Disbursement  
LIST RENTAL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

843.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CURRY GOAT ENTERTAINMENT LLC**

Mailing Address P.O. BOX 1206

City  
MILWAUKEEState  
WIZip Code  
53201Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

6970.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

560.00

☐ Memo Item

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

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

8373.06

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

PAGE 37 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. GRANITE LISTS, LLC**

Mailing Address P.O. BOX 3084

City  
PETERBOROUGHState  
NHZip Code  
03458Purpose of Disbursement  
LIST RENTAL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

302.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAILING CORP SOUTHWEST PUBLISHING &**

Mailing Address 4000 SE ADAMS STREET

City  
TOPEKAState  
KSZip Code  
66609Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I30916

Amount of Each Disbursement this Period

10164.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PINNACLE LIST COMPANY**Mailing Address 2800 SHIRLINGTON ROAD  
STE. 970City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
LIST RENTAL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

1553.25

☐ Memo Item

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

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

12020.49

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

PAGE 38 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. SCM ASSOCIATES, INC.**

Date of Disbursement

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

Mailing Address 45 MAIN STREET

City  
PETERBOROUGHState  
NHZip Code  
03458Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

3347.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement

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

Mailing Address 4000 SE ADAMS STREET

City  
TOPEKAState  
KSZip Code  
66609-1160Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I30917

Amount of Each Disbursement this Period

15396.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STEVE BROWN DIRECT MAIL**

Date of Disbursement

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

Mailing Address 3864 W MILLERS BRIDGE ROAD  
10045 WHITETAIL LANECity  
TALLAHASSEEState  
FLZip Code  
32312Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3091

Amount of Each Disbursement this Period

8756.33

☐ Memo Item

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

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

27500.00

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

PAGE 39 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. THE CONSERVATIVE DIGEST**

Mailing Address 11324 POTTER ROAD

City  
WAUWATOSAState  
WIZip Code  
53226Purpose of Disbursement  
REIMBURSEMENT FOR EVENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3094

Amount of Each Disbursement this Period

 1050.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILAND DIRECT INC.**

Mailing Address P.O. BOX 74007509

City  
CHICAGOState  
ILZip Code  
60674Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3091

Amount of Each Disbursement this Period

 2324.01☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.I3096

Amount of Each Disbursement this Period

 6.30☐ Memo Item

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

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

 3380.31

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

PAGE 40 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			05			2020			

FEC Identification Number

C

Transaction ID : SB21B.I30961

Amount of Each Disbursement this Period

18.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			08			2020			

FEC Identification Number

C

Transaction ID : SB21B.I30967

Amount of Each Disbursement this Period

15.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			10			2020			

FEC Identification Number

C

Transaction ID : SB21B.I3096

Amount of Each Disbursement this Period

11.65

☐ Memo Item

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

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

44.92



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

PAGE 41 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3096

Amount of Each Disbursement this Period

2.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

8.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

50.54

☐ Memo Item

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

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

61.00

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

PAGE 42 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

49.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

7.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097

Amount of Each Disbursement this Period

31.18

☐ Memo Item

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

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

87.90

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

PAGE 43 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WINRED**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3097!

Amount of Each Disbursement this Period

1.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WISC DEPT OF REVENUE**

Mailing Address P.O. BOX 930208

City  
MILWAUKEEState  
WIZip Code  
53293-0001Purpose of Disbursement  
EMPLOYEE GARNISHMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I30927

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WISC DEPT OF REVENUE**

Mailing Address P.O. BOX 930208

City  
MILWAUKEEState  
WIZip Code  
53293-0001Purpose of Disbursement  
FILING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

10.00

☐ Memo Item

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

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

211.74

74003.94

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

PAGE 44 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CALLAHAN, CALVIN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB30B.I30981

Amount of Each Disbursement this Period

 1146.92☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CALLAHAN, CALVIN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB30B.I30981

Amount of Each Disbursement this Period

 1146.93☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DICKIE, RICHARD, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703-4620Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB30B.I30981

Amount of Each Disbursement this Period

 1208.44☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 3502.29

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

PAGE 45 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DICKIE, RICHARD, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703-4620Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

1272.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FOSTER, JOHN, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

589.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FOSTER, JOHN, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

736.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2598.42

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

PAGE 46 OF 87

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

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. HEIMBACH, DONNA, , ,

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703-2425Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

 475.05☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HEIMBACH, DONNA, , ,

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703-2425Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

 621.62☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HEUP, AMELIA, , ,

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

 1282.29☐ Memo Item

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

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

 2378.96

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

PAGE 47 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. HEUP, AMELIA, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2020

FEC Identification Number

**C**

Transaction ID : SB30B.I3098

Amount of Each Disbursement this Period

1472.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUFFMAN, CARLTON, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		15		2020

FEC Identification Number

**C**

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

1732.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUFFMAN, CARLTON, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2020

FEC Identification Number

**C**

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

1932.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5137.87

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

PAGE 48 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. KARST, DAVID, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

1369.85

☐

Memo Item

Full Name (Last, First, Middle Initial)

B. KARST, DAVID, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

1524.59

☐

Memo Item

Full Name (Last, First, Middle Initial)

C. LIPSKI, ROGER, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

394.97

☐

Memo Item

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

3289.41

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. LIPSKI, ROGER, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3099!

Amount of Each Disbursement this Period

471.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LONDON, BETH, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3097!

Amount of Each Disbursement this Period

1282.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LONDON, BETH, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3097

Amount of Each Disbursement this Period

1416.69

☐ Memo Item

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

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

3170.15

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

PAGE 50 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. **MACKEY, KYLE, , ,**

Date of Disbursement

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

Mailing Address 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C 

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

 274.86☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **OLMSTEAD, CHRISTOPHER, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C 

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

 1865.79☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **OLMSTEAD, CHRISTOPHER, , ,**

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C 

Transaction ID : SB30B.I3099

Amount of Each Disbursement this Period

 2235.35☐ Memo Item

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

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

 4376.00

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

PAGE 51 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PARNELL, CHRISTIAN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB30B.I3100'

Amount of Each Disbursement this Period

 1326.20☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PARNELL, CHRISTIAN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB30B.I31002

Amount of Each Disbursement this Period

 1538.90☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PITTS, HENRY, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

 617.35☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶ 3482.45**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RETZA, RYAN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

1168.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RETZA, RYAN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

1509.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHMIDT, KATELYN, , ,**

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

1532.93

☐ Memo Item

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

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

4210.39

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

PAGE 53 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. SCHMIDT, KATELYN, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

[REDACTED] 1532.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SCHROEDER, KYLE, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

[REDACTED] 1223.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SCHROEDER, KYLE, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I3100

Amount of Each Disbursement this Period

[REDACTED] 1481.96

☐ Memo Item

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

[REDACTED] 4238.15

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

[REDACTED]

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

PAGE 54 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. SPINDT, MIRANDA, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C

Transaction ID : SB30B.I31011

Amount of Each Disbursement this Period

1146.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SPINDT, MIRANDA, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C

Transaction ID : SB30B.I31011

Amount of Each Disbursement this Period

1146.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STOLTE, CARL, , ,

Date of Disbursement

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

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

C

Transaction ID : SB30B.I31011

Amount of Each Disbursement this Period

558.13

☐ Memo Item

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

2851.98

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

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

PAGE 55 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. STOLTE, CARL, , ,

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	2	0		

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3101

Amount of Each Disbursement this Period

778.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUEBLOOD, NATHANIEL, , ,

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	1		1	5		2	0	2	0		

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I31014

Amount of Each Disbursement this Period

1455.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUEBLOOD, NATHANIEL, , ,

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	2	0		

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3101

Amount of Each Disbursement this Period

1927.23

☐ Memo Item

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

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

4161.24

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

PAGE 56 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WOJCIK, COLLIN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		15		2020

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB30B.I31011

Amount of Each Disbursement this Period

1362.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WOJCIK, COLLIN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2020

Mailing Address C/O 148 E JOHNSON STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB30B.I31017

Amount of Each Disbursement this Period

1641.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		15		2020

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB30B.I3101

Amount of Each Disbursement this Period

79.00

☐ Memo Item

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

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

3083.39



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

PAGE 57 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB30B.I3101

Amount of Each Disbursement this Period

 79.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB30B.I3102

Amount of Each Disbursement this Period

 7899.43☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB30B.I3102

Amount of Each Disbursement this Period

 362.88☐ Memo Item

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

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

 8341.31

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

PAGE 58 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

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

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3102

Amount of Each Disbursement this Period

8101.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

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

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3102

Amount of Each Disbursement this Period

371.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

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

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB30B.I3102

Amount of Each Disbursement this Period

194.25

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

8666.58

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		02		2020

Mailing Address P.O. BOX 6164

City  
INDIANAPOLISState  
INZip Code  
46206-6164Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3092

Amount of Each Disbursement this Period

1747.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		02		2020

Mailing Address P.O. BOX 6164

City  
INDIANAPOLISState  
INZip Code  
46206-6164Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3092

Amount of Each Disbursement this Period

1084.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		29		2020

Mailing Address P.O. BOX 6164

City  
INDIANAPOLISState  
INZip Code  
46206-6164Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3093

Amount of Each Disbursement this Period

1023.56

☐ Memo Item

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

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

3855.29

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

PAGE 60 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DELTA DENTAL**

Mailing Address P.O. BOX 518

City  
WISCONSIN RAPIDSState  
WIZip Code  
54495-6001Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2020

FEC Identification Number

C

Transaction ID : SB21B.I30921

Amount of Each Disbursement this Period

515.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA DENTAL**

Mailing Address P.O. BOX 518

City  
WISCONSIN RAPIDSState  
WIZip Code  
54495-6001Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2020

FEC Identification Number

C

Transaction ID : SB21B.I30921

Amount of Each Disbursement this Period

11.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EMPLOYEE BENEFITS CORPORATION**

Mailing Address P.O. BOX 44347

City  
MADISONState  
WIZip Code  
53744-4347Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		03		2020

FEC Identification Number

C

Transaction ID : SB21B.I3092

Amount of Each Disbursement this Period

167.72

☐ Memo Item

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

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

695.13

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

PAGE 61 OF 87

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. EMPLOYEE BENEFITS CORPORATION**

Mailing Address P.O. BOX 44347

City  
MADISONState  
WIZip Code  
53744-4347Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3092

Amount of Each Disbursement this Period

68.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EMPLOYEE BENEFITS CORPORATION**

Mailing Address P.O. BOX 44347

City  
MADISONState  
WIZip Code  
53744-4347Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3092

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. QUARTZ**

Mailing Address P.O. BOX 78730

City  
MILWAUKEEState  
WIZip Code  
53278Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3092

Amount of Each Disbursement this Period

4084.38

☐ Memo Item

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

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

4202.89

72241.90

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 62 OF 87

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

ADVANTAGE DIRECT

Nature of Debt (Purpose):

VOIP, LISTS &amp; MOBILE APP DEVELOPMENT

Mailing Address 2300 CLARENDON BLVD

City

ARLINGTON

State

VA

Zip Code

22201

Outstanding Balance Beginning This Period

26626.36

Transaction ID : 031919D1\_B\_B

Amount Incurred This Period

0.00

Payment This Period

16318.28

Outstanding Balance at Close of This Period

10308.08

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

10308.08

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

10308.08

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

10308.08

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : 031919D1\_B\_B

Payment to date amount represents \$5,000 payment on 12/3/19, \$5,000 payment on 12/17/19 and \$28,882.71 adjustment based on full reconciliation of outstanding invoices due.

Form/Schedule:

Transaction ID:

**SCHEDULE H1 (FEC Form 3X)****METHOD OF ALLOCATION FOR:**

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Transaction ID : 022020a

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

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

**B. Separate Segregated Funds and Nonconnected Committees****Indicate ratio below**Federal.....  %Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative ☐      Generic Voter Drive ☐      Public Communications Referencing Party Only ☐



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

PAGE 65 OF 87

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN  
NONFEDERAL ACCOUNT

DATE OF RECEIPT

MM / DD / YYYY  
01 / 08 / 2020

TOTAL AMOUNT TRANSFERRED

6835.96

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

6835.96

Transaction ID : 022020B

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

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

PAGE 66 OF 87

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN  
NONFEDERAL ACCOUNT

DATE OF RECEIPT

MM / DD / YYYY  
01 / 08 / 2020

TOTAL AMOUNT TRANSFERRED

9354.60

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

9354.60

Transaction ID : 022020B\_B

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

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

PAGE 67 OF 87

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN  
 NONFEDERAL ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2020

TOTAL AMOUNT TRANSFERRED

4860.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

4860.00

Transaction ID : 022020B\_B\_B

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

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

PAGE 68 OF 87

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

## NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN  
NONFEDERAL ACCOUNT

## DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2020

## TOTAL AMOUNT TRANSFERRED

15087.83

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

15087.83

Transaction ID : 022020B\_B\_B\_B

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

36138.39

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).....

36138.39

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

PAGE 69 OF 87

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30912</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>ADVANCED DISPOSAL - MADISON</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 74008053			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CHICAGO	State IL	Zip Code 60674	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: WASTE REMOVAL		001 Category/ Type	Allocated Activity or Event Year-To-Date 829.64	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
232.30			597.34	
		=	TOTAL AMOUNT	
			829.64	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30890</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>BMO HARRIS BANK</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 5700			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CAROL STREAM	State IL	Zip Code 60197	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: CREDIT CARD PAYMENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 3715.14	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
807.94			2077.56	
		=	TOTAL AMOUNT	
			2885.50	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30904</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>CITY OF MADISON TREASURER</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 2999			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MADISON	State WI	Zip Code 53701-3388	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PROPERTY TAX		001 Category/ Type	Allocated Activity or Event Year-To-Date 16707.64	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
3637.90			9354.60	
		=	TOTAL AMOUNT	
			12992.50	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4678.14		12029.50		16707.64

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30909</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
MADISON GAS AND ELECTRIC			<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 1231			Allocated Activity or Event Year-To-Date	
City MADISON	State WI	Zip Code 53701-1231	17540.97	
Purpose of Disbursement: UTILITIES		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	M M / D D / Y Y Y Y Y Y 01 / 08 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
233.33			600.00	
		=	TOTAL AMOUNT	
			833.33	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30893</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
NATIONWIDE			<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 10479			Allocated Activity or Event Year-To-Date	
City DES MOINES	State IA	Zip Code 50306	17663.97	
Purpose of Disbursement: INSURANCE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	M M / D D / Y Y Y Y Y Y 01 / 08 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
34.44			88.56	
		=	TOTAL AMOUNT	
			123.00	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30894</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
PRO ONE JANITORIAL, INC.			<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 78730			Allocated Activity or Event Year-To-Date	
City MILWAUKEE	State WI	Zip Code 53278-1133	18258.97	
Purpose of Disbursement: JANITORIAL SERVICES		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	M M / D D / Y Y Y Y Y Y 01 / 08 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
166.60			428.40	
		=	TOTAL AMOUNT	
			595.00	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
434.37		1116.96		1551.33

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30907</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
TDS			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 94510			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City PALATINE	State IL	Zip Code 60094	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: TELEPHONE		001 Category/ Type	Allocated Activity or Event Year-To-Date 20925.77	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
746.70			1920.10	
		=	TOTAL AMOUNT	
			2666.80	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30898</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
WAUKESHA EAST COMMERCE CENTER LLC			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1703 PEARL STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City WAUKESHA	State WI	Zip Code 53186	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE RENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 22486.89	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
437.11			1124.01	
		=	TOTAL AMOUNT	
			1561.12	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30913</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
CHRISTENSON, KARI, , ,			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1414 HICKORY STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City ONALASKA	State WI	Zip Code 54650	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE RENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 24486.89	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
560.00			1440.00	
		=	TOTAL AMOUNT	
			2000.00	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1743.81		4484.11		6227.92

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30897</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>CURRY GOAT ENTERTAINMENT LLC</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 1206			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MILWAUKEE	State WI	Zip Code 53201	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE RENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 27986.89	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
980.00			2520.00	
		=	TOTAL AMOUNT	
			3500.00	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30914</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>REPUBLICAN PARTY OF MARATHON COUNTY</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 834			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City WAUSAU	State WI	Zip Code 54402	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: REIMBURSEMENT FOR OFFICE RENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 28736.89	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
210.00			540.00	
		=	TOTAL AMOUNT	
			750.00	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30915</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>REPUBLICAN PARTY-EAU CLAIRE COUNTY</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 325			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City EAU CLAIRE	State WI	Zip Code 54702	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: REIMBURSEMENT FOR OFFICE RENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 29236.89	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
140.00			360.00	
		=	TOTAL AMOUNT	
			500.00	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1330.00		3420.00		4750.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30902</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>ACCOUNTANTS WORLD PAYROLL LLC</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 140 FELL COURT			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City HAUPPAUGE	State NY	Zip Code 11788	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL PROCESSING FEE		001 Category/ Type	Allocated Activity or Event Year-To-Date 29284.14	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
13.23			34.02	
		=	TOTAL AMOUNT	
			47.25	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30892</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>CMDI</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1593 SPRING HILL ROAD			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City TYSONS CORNER	State VA	Zip Code 22182	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DATABASE SOFTWARE		001 Category/ Type	Allocated Activity or Event Year-To-Date 30186.64	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
252.70			649.80	
		=	TOTAL AMOUNT	
			902.50	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30889</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>ASPECT CONSULTING, LLC</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 620066			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MIDDLETON	State WI	Zip Code 53562	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: COMPLIANCE CONSULTING		001 Category/ Type	Allocated Activity or Event Year-To-Date 35186.64	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
1400.00			3600.00	
		=	TOTAL AMOUNT	
			5000.00	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1665.93		4283.82		5949.75

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30888</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>BADGERLAND CHEMICAL &amp; SUPPLY, INC</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 8505 UNIVERSITY GREEN			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MIDDLETON	State WI	Zip Code 53562-0303	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: CLEANING SUPPLIES		001 Category/ Type	Allocated Activity or Event Year-To-Date 35284.17	
Activity or Event Identifier: ADMINISTRATIVE			Date 01 / 31 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
27.31			70.22	
		=	TOTAL AMOUNT	
			97.53	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30906</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>BEST BUDS LLC</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 348 WOODLAND CIRCLE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MADISON	State WI	Zip Code 53704	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SNOW REMOVAL		001 Category/ Type	Allocated Activity or Event Year-To-Date 35554.17	
Activity or Event Identifier: ADMINISTRATIVE			Date 01 / 31 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
75.60			194.40	
		=	TOTAL AMOUNT	
			270.00	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30891</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>BMO HARRIS BANK</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 5700			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CAROL STREAM	State IL	Zip Code 60197	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: CREDIT CARD PAYMENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 39651.62	
Activity or Event Identifier: ADMINISTRATIVE			Date 01 / 31 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
1147.29			2950.16	
		=	TOTAL AMOUNT	
			4097.45	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1250.20		3214.78		4464.98

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30901</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>CENTURY SPRINGS BOTTLING CO.</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 856858			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MINNEAPOLIS	State MN	Zip Code 55485	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE WATER		001 Category/ Type	Allocated Activity or Event Year-To-Date 39690.87	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
10.99			28.26	
		=	TOTAL AMOUNT	
			39.25	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30903</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>EASY PERMIT POSTAGE</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 371874			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City PITTSBURGH	State PA	Zip Code 15250	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: POSTAGE		001 Category/ Type	Allocated Activity or Event Year-To-Date 41985.28	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
642.43			1651.98	
		=	TOTAL AMOUNT	
			2294.41	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30887</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>HARKER HEATING AND COOLING, INC</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 87 W BELTLINE HIGHWAY			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MADISON	State WI	Zip Code 53713	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: BUILDING MAINTENANCE		001 Category/ Type	Allocated Activity or Event Year-To-Date 42168.59	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
51.33			131.98	
		=	TOTAL AMOUNT	
			183.31	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
704.75		1812.22		2516.97

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30910</b> <input type="checkbox"/> Memo Item <b>MADISON GAS AND ELECTRIC</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 1231			Allocated Activity or Event Year-To-Date		
City MADISON	State WI	Zip Code 53701-1231	<div> <div>001</div> <div>Category/ Type</div> </div>		
Purpose of Disbursement: UTILITIES			<div> <div>01</div> <div>31</div> <div>2020</div> </div>		
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date		
FEDERAL SHARE			TOTAL AMOUNT		
277.24			990.14		
+ NONFEDERAL SHARE			=		
712.90			990.14		

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30911</b> <input type="checkbox"/> Memo Item <b>MADISON WATER UTILITY</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 119 EAST OLIN AVE			Allocated Activity or Event Year-To-Date		
City MADISON	State WI	Zip Code 53713	<div> <div>001</div> <div>Category/ Type</div> </div>		
Purpose of Disbursement: UTILITIES			<div> <div>01</div> <div>31</div> <div>2020</div> </div>		
Activity or Event Identifier: ADMINISTRATIVE			Date		
FEDERAL SHARE			TOTAL AMOUNT		
30.01			107.18		
+ NONFEDERAL SHARE			=		
77.17			107.18		

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30896</b> <input type="checkbox"/> Memo Item <b>PITNEY BOWES GLOBAL FINANCIAL SERVICES,</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 371887			Allocated Activity or Event Year-To-Date		
City PITTSBURGH	State PA	Zip Code 15250	<div> <div>001</div> <div>Category/ Type</div> </div>		
Purpose of Disbursement: OFFICE MACHINES			<div> <div>01</div> <div>31</div> <div>2020</div> </div>		
Activity or Event Identifier: ADMINISTRATIVE			Date		
FEDERAL SHARE			TOTAL AMOUNT		
225.32			804.70		
+ NONFEDERAL SHARE			=		
579.38			804.70		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
532.57		1369.45		1902.02

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30895</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
PRO ONE JANITORIAL, INC.			<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 78730			Allocated Activity or Event Year-To-Date	
City MILWAUKEE	State WI	Zip Code 53278-1133	44665.61	
Purpose of Disbursement: JANITORIAL SERVICES		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	M M / D D / Y Y Y Y Y Y 01 / 31 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
166.60			428.40	
		=	TOTAL AMOUNT	
			595.00	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30905</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
SHRED-IT			<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 28883 NETWORK PLACE SUITE 112			Allocated Activity or Event Year-To-Date	
City CHICAGO	State IL	Zip Code 60673	44776.49	
Purpose of Disbursement: SHREDDING SERVICE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	M M / D D / Y Y Y Y Y Y 01 / 31 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
31.05			79.83	
		=	TOTAL AMOUNT	
			110.88	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.30908</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
TDS			<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 94510			Allocated Activity or Event Year-To-Date	
City PALATINE	State IL	Zip Code 60094	47438.82	
Purpose of Disbursement: TELEPHONE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	M M / D D / Y Y Y Y Y Y 01 / 31 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
745.45			1916.88	
		=	TOTAL AMOUNT	
			2662.33	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
943.10		2425.11		3368.21

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30899</b> <input type="checkbox"/> Memo Item <b>WAUKESHA EAST COMMERCE CENTER LLC</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1703 PEARL STREET			Allocated Activity or Event Year-To-Date		
City WAUKESHA	State WI	Zip Code 53186	49081.56		
Purpose of Disbursement: OFFICE RENT		001	Date 01 / 31 / 2020		
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
459.97			1182.77		1642.74

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.30900</b> <input type="checkbox"/> Memo Item <b>WELLS FARGO VENDOR FINANCIAL SERVICE</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 105710			Allocated Activity or Event Year-To-Date		
City ATLANTA	State GA	Zip Code 30348	51141.96		
Purpose of Disbursement: OFFICE RENT		001	Date 01 / 31 / 2020		
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
576.91			1483.49		2060.40

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31027</b> <input checked="" type="checkbox"/> Memo Item <b>FESTIVAL FOODS</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 810 E WASHINGTON AVENUE			Allocated Activity or Event Year-To-Date		
City MADISON	State WI	Zip Code 53703	25.28		
Purpose of Disbursement: 1/8 cc pmt:OFFICE SUPPLIES		001	Date 11 / 11 / 2019		
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.08			18.20		25.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1036.88		2666.26		3703.14

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31028</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
AMAZON.COM			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1516 2ND AVENUE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SEATTLE	State WA	Zip Code 98101	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 1/8 cc pmt:OFFICE SUPPLIES		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11 / 19 / 2019</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
9.33			23.99	
		=	TOTAL AMOUNT	
			33.32	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31029</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
MICROSOFT			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1 MICROSOFT WAY			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City REDMOND	State WA	Zip Code 98052	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 1/8 cc pmt:SOFTWARE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11 / 20 / 2019</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
92.37			237.53	
		=	TOTAL AMOUNT	
			329.90	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31030</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
USPS			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3902 MILWAUKEE STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MADISON	State WI	Zip Code 53714	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 1/8 cc pmt:POSTAGE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11 / 20 / 2019</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
30.80			79.20	
		=	TOTAL AMOUNT	
			110.00	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31031</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
ADOBE SYSTEMS			<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 801 N 34TH STREET			Allocated Activity or Event Year-To-Date	
City SEATTLE	State WA	Zip Code 98103	<div> <div>11</div> <div>25</div> <div>2019</div> </div>	
Purpose of Disbursement: 1/8 cc pmt:SOFTWARE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
15.65			40.25	
		=	TOTAL AMOUNT	
			55.90	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31032</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
USPS			<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 3902 MILWAUKEE STREET			Allocated Activity or Event Year-To-Date	
City MADISON	State WI	Zip Code 53714	<div> <div>11</div> <div>25</div> <div>2019</div> </div>	
Purpose of Disbursement: 1/8 cc pmt:POSTAGE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
9.95			25.59	
		=	TOTAL AMOUNT	
			35.54	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31033</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
MILWAUKEE JOURNAL SENTINEL			<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 2929			Allocated Activity or Event Year-To-Date	
City MILWAUKEE	State WI	Zip Code 53201	<div> <div>11</div> <div>30</div> <div>2019</div> </div>	
Purpose of Disbursement: 1/8 cc pmt:SUBSCRIPTION		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.80			7.19	
		=	TOTAL AMOUNT	
			9.99	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31034</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>AMAZON.COM</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1516 2ND AVENUE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SEATTLE	State WA	Zip Code 98101	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 1/8 cc pmt:OFFICE SUPPLIES		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="128.10"/>			<input type="text" value="329.40"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="457.50"/>	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31037</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>ICOMBAT MADISON</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2919 MARKETPLACE DRIVE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City FITCHBURG	State WI	Zip Code 53719	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 1/8 cc pmt:STAFF EVENT		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="103.39"/>			<input type="text" value="265.86"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="369.25"/>	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31035</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
<b>SPECTRUM</b>			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 400 ATLANTIC STREET, 10TH FLOOR			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City STAMFORD	State CT	Zip Code 06901	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 1/8 cc pmt:UTILITIES		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="40.81"/>			<input type="text" value="104.94"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="145.75"/>	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

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

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

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

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31036</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>STAPLES</b>				
Mailing Address 126 S KOELLER AVENUE				
City OSHKOSH	State WI	Zip Code 54901		
Purpose of Disbursement: 1/8 cc pmt:OFFICE SUPPLIES		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date 12 / 04 / 2019	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
9.58			24.65	34.23

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31039</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>AT&amp;T</b>				
Mailing Address P.O. BOX 5014				
City CAROL STREAM	State IL	Zip Code 60507-9100		
Purpose of Disbursement: 1/8 cc pmt:TELEPHONE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			Date 12 / 09 / 2019	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
12.56			32.28	44.84

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31038</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>CONVOSO</b>				
Mailing Address 20950 WARNER CENTER LANE				
City WOODLAND HILLS	State CA	Zip Code 91367		
Purpose of Disbursement: 1/8 cc pmt:PREDICTIVE DIALER		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			Date 12 / 09 / 2019	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
345.52			888.48	1234.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31044</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>CHICK-FIL-A</b>				
Mailing Address 430 S GAMMON ROAD				
City MADISON	State WI	Zip Code 53719		
Purpose of Disbursement: 1/31 cc pmt:STAFF EVENT		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="12"/> <input type="text" value="11"/> <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="131.27"/>			<input type="text" value="337.54"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="468.81"/>	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31042</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>ICOMBAT MADISON</b>				
Mailing Address 2919 MARKETPLACE DRIVE				
City FITCHBURG	State WI	Zip Code 53719		
Purpose of Disbursement: 1/31 cc pmt:STAFF EVENT		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="12"/> <input type="text" value="11"/> <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="51.70"/>			<input type="text" value="132.93"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="184.63"/>	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31043</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>OFFICE MAX</b>				
Mailing Address P.O. BOX 92735				
City CHICAGO	State IL	Zip Code 60675-2735		
Purpose of Disbursement: 1/31 cc pmt:OFFICE SUPPLIES		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="12"/> <input type="text" value="11"/> <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="34.26"/>			<input type="text" value="88.08"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="122.34"/>	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

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

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

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

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31045</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>4IMPRINT</b>			<b>Allocated Activity or Event Year-To-Date</b>	
Mailing Address 101 COMMERCE STREET				
City OSHKOSH	State WI	Zip Code 54901		
Purpose of Disbursement: 1/31 cc pmt:PRINTING - NOT FEA		001 Category/ Type		
Activity or Event Identifier: <b>ADMINISTRATIVE</b>			Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="358.33"/>			<input type="text" value="921.43"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="1279.76"/>	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31046</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>MICROSOFT</b>			<b>Allocated Activity or Event Year-To-Date</b>	
Mailing Address 1 MICROSOFT WAY				
City REDMOND	State WA	Zip Code 98052		
Purpose of Disbursement: 1/31 cc pmt:SOFTWARE		001 Category/ Type		
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="92.37"/>			<input type="text" value="237.53"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="329.90"/>	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.31047</b> <input checked="" type="checkbox"/> Memo Item			<b>Allocated Activity or Event:</b> <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	
<b>USPS</b>			<b>Allocated Activity or Event Year-To-Date</b>	
Mailing Address 3902 MILWAUKEE STREET				
City MADISON	State WI	Zip Code 53714		
Purpose of Disbursement: 1/31 cc pmt:POSTAGE		001 Category/ Type		
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2019"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="4.40"/>			<input type="text" value="11.30"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="15.70"/>	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

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

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

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

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31048</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
ADOBE SYSTEMS			<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 801 N 34TH STREET			Allocated Activity or Event Year-To-Date	
City SEATTLE	State WA	Zip Code 98103	<div> <div>001</div> <div>Category/ Type</div> </div>	
Purpose of Disbursement: 1/31 cc pmt:SOFTWARE			Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>12</div> <div>25</div> <div>2019</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
15.65			40.25	55.90

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31049</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
MILWAUKEE JOURNAL SENTINEL			<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 2929			Allocated Activity or Event Year-To-Date	
City MILWAUKEE	State WI	Zip Code 53201	<div> <div>001</div> <div>Category/ Type</div> </div>	
Purpose of Disbursement: 1/31 cc pmt:SUBSCRIPTION			Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>12</div> <div>31</div> <div>2019</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.80			7.19	9.99

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31050</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
SPECTRUM			<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 400 ATLANTIC STREET, 10TH FLOOR			Allocated Activity or Event Year-To-Date	
City STAMFORD	State CT	Zip Code 06901	<div> <div>001</div> <div>Category/ Type</div> </div>	
Purpose of Disbursement: 1/31 cc pmt:UTILITIES			Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>01</div> <div>03</div> <div>2020</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
46.09			118.52	164.61

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31051</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
CONVOSO			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 20950 WARNER CENTER LANE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
WOODLAND HILLS	CA	91367		
Purpose of Disbursement: 1/31 cc pmt:PREDICTIVE DIALER		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>01 / 05 / 2020</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
345.52			888.48	
		=	TOTAL AMOUNT	
			1234.00	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31052</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
BMO HARRIS BANK			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 5700			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
CAROL STREAM	IL	60197		
Purpose of Disbursement: 1/31 cc pmt:CREDIT CARD FEE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>01 / 06 / 2020</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
10.92			28.08	
		=	TOTAL AMOUNT	
			39.00	

C. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31053</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
USPS			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3902 MILWAUKEE STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
MADISON	WI	53714		
Purpose of Disbursement: 1/31 cc pmt:POSTAGE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>01 / 06 / 2020</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.32			5.98	
		=	TOTAL AMOUNT	
			8.30	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31054</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
AT&T			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 5014			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
CAROL STREAM	IL	60507-9100	Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: 1/31 cc pmt:TELEPHONE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	01 / 07 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
12.56			32.28	
		=	TOTAL AMOUNT	
			44.84	

B. Full Name (Last, First, Middle Initial) <b>Transaction ID : SB21A.31055</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
BMO HARRIS BANK			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 5700			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
CAROL STREAM	IL	60197	Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: 1/31 cc pmt:CREDIT CARD FEE		001	Date	
Activity or Event Identifier: ADMINISTRATIVE		Category/ Type	01 / 10 / 2020	
FEDERAL SHARE		+	NONFEDERAL SHARE	
39.11			100.56	
		=	TOTAL AMOUNT	
			139.67	

C. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Mailing Address			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
State			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code			Allocated Activity or Event Year-To-Date	
Purpose of Disbursement:			Date	
Activity or Event Identifier:			M M / D D / Y Y Y Y Y Y	
Category/ Type				
FEDERAL SHARE		+	NONFEDERAL SHARE	
		=	TOTAL AMOUNT	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
14319.75	36822.21	51141.96