FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Republican Party of Wisconsin 148 E. Johnson St. ADDRESS (number and street) (Check if address is changed) Madison 53703 WI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kate@aspectcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.wisgop.org (Check if address is changed) DATE 07 2017 C00074450 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Hitt, Andrew, , , Type or Print Name of Treasurer Hitt, Andrew,,, [Electronically Filed] Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF C	OMMITTEE • Committee:		
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate	
Name of Candidate			
Candidate Party Affiliati	on Office Sought: House Senate President	State	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Con	nmittee: (National, State	(Democratic,	
(d) x	This committee is a STA or subordinate) committee of the REP	Republican, etc.) Party	
Political A	ction Committee (PAC):		
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is	
	Corporation Corporation w/o Capital Stock	Labor Organization	
	Membership Organization Trade Association	Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.		
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)			
	In addition, this committee is a Lobbyist/Registrant PAC.		
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint Fund	Iraising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	wo or more political	
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for the	vo or more political	
Ц	committees/organizations, none of which is an authorized committee of a federal candidate.	·	
Com	mittees Participating in Joint Fundraiser		
1.	FEC ID number		
2.	FEC ID number		
3.	FEC ID number		
4.			

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Write or Type Committee Name	3	
Republican Par	ty of Wisconsin	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
Badger Victory Fund		
	138 Conant Street	
Mailing Address	Second Floor	
	Beverly MA	01915
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Represen	ntative Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the	person in possession of committee
Lind, Kate	193	
Full Name	8401 Excelsior Drive	
Mailing Address	Suite 103	
	Madison	,53717
Title or Position	CITY STATE	ZIP CODE
Compliance	Telephone number	608 - 833 - 5658
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committeessistant treasurer).	ee; and the name and address of
Full Name Hitt, Andre	w, , ,	
of Treasurer	148 E Johnson Street	
Mailing Address		
	Madison W	
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	608 - 257 - 4765

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Full Name of Designated Agent Morgan, M	/lark, , ,					
Mailing Address	148 E Johnson St.					
	Madison CITY	STATE 53703	ZIP CODE			
Title or Position Executive Director	Telephone nu	mber 608 – _	257 - 4765			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. BMO Harris Bank N.A.						
Mailing Address	1 W Main St.					
	Madison	WI 53703				
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
Chain Mailing Address	Bridge Bank N.A. 1445 Laughlin Avenue					
	McLean	VA 22101				
	CITY	STATE	ZIP CODE			

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı ŞuņTruşt Bank PO Box 4418 Mailing Address 30302 GΑ Atlanta ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Team Gallagher 824 South Milledge Avenue Mailing Address Suite 101 GΑ 30605 Athens **CITY** STATE 4 ZIP CODE Relationship: X Joint Fundraising Representative Affiliated Committee Leadership PAC Sponsor Connected Organization [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number