

# 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**  
**Wisconsin Medical Society Political Action Committee**

ADDRESS (number and street) **330 E. Lakeside Street**  
Check if different than previously reported. (ACC) **Madison WI 53715**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00548438** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 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 **07 / 31 / 2018** in the State of **WI**  
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period **07 / 01 / 2018** through **07 / 25 / 2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Green, Heidi, , Ms.,  
Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Green, Heidi, , Ms., [Electronically Filed] Date **08 / 01 / 2018**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1450.00"/>	<input type="text" value="21590.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1450.00"/>	<input type="text" value="21590.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1450.00"/>	<input type="text" value="21590.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Wisconsin Medical Society Political Action Committee**

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

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).....	1450.00	21590.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1450.00	21590.00
(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) .....	1450.00	21590.00
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).....	0.00	0.00
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).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1450.00	21590.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1450.00	21590.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1450.00	21590.00
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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1450.00	21590.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1450.00	21590.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	1450.00	21590.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1450.00	21590.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Wisconsin Medical Society Political Action Committee**

**A. Vasudevan, Sridhar, V., Doctor,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5200 Upper Lakeview Ridge Rd

City Belgium	State WI	Zip Code 53004-9001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Physician
--	--

Receipt For: 2017  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2018

**Transaction ID : 9751748**

Amount of Each Receipt this Period  

1000.00
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 Memo Item

Earmark for Leah for Senate

**B. Osborn, Sandra, L., Doctor,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2085 County Road J

City Verona	State WI	Zip Code 53593-8829
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Physician
--	--

Receipt For: 2017  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2018

**Transaction ID : 9751752**

Amount of Each Receipt this Period  

50.00
-------

 Memo Item

Earmark for Tammy Baldwin for Senate

**C. Vasudevan, Sridhar, V., Doctor,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5200 Upper Lakeview Ridge Rd

City Belgium	State WI	Zip Code 53004-9001
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Physician
--	--

Receipt For: 2017  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2018

**Transaction ID : 9780111**

Amount of Each Receipt this Period  

50.00
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 Memo Item

Earmark for Glenn Grothman for Congress

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> 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 7 OF 9
	<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)  
**Wisconsin Medical Society Political Action Committee**

**A. Lee, Don, Suk, Doctor,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9751 W Prairie Grass Way

City Franklin	State WI	Zip Code 53132-7201
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSM Inpatient Medicine Program - Milwa	Occupation (for Individual) Physician
---	--

Receipt For: 2017  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07		12		2018

**Transaction ID : 9780113**

Amount of Each Receipt this Period  
100.00

Memo Item

Earmark for Glenn Grothman for Congress

**B. Lee, Don, Suk, Doctor,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9751 W Prairie Grass Way

City Franklin	State WI	Zip Code 53132-7201
------------------	-------------	------------------------

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

Name of Employer (for Individual) CSM Inpatient Medicine Program - Milwa	Occupation (for Individual) Physician
---	--

Receipt For: 2017  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07		09		2018

**Transaction ID : 9780120**

Amount of Each Receipt this Period  
250.00

Memo Item

Earmark for Leah for Senate

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1450.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Leah for Senate**

Mailing Address P.O. Box 488

City Brookfield State WI Zip Code 53008

Purpose of Disbursement  
Earmark by Sri Vasudevan; PAC limits unaffected

Category/  
Type

Candidate Name  
**Vukmir, Leah, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2017  Primary  General  Other (specify) ▼  
State: WI District:

Date of Disbursement  
M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2018

FEC Identification Number

**Transaction ID : 9751754**  
Amount of Each Disbursement this Period

Memo Item Earmark by Sri Vasudevan; PAC limits unaffected

Full Name (Last, First, Middle Initial)

**B. Tammy Baldwin for Senate**

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Earmark by Sandra Osborn; PAC limited unaffected

Category/  
Type

Candidate Name  
**Baldwin, Tammy, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2017  Primary  General  Other (specify) ▼  
State: WI District:

Date of Disbursement  
M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2018

FEC Identification Number

**Transaction ID : 9751755**  
Amount of Each Disbursement this Period

Memo Item Earmark by Sandra Osborn; PAC limited unaffected

Full Name (Last, First, Middle Initial)

**C. Glenn Grothman for Congress**

Mailing Address P.O. Box 1215

City Fond du Lac State WI Zip Code 54936

Purpose of Disbursement  
Earmark by (see memo entries) PAC limits unaffected

Category/  
Type

Candidate Name  
**Grothman, Glenn, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2017  Primary  General  Other (specify) ▼  
State: WI District: 00

Date of Disbursement  
M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2018

FEC Identification Number

**Transaction ID : 9780115**  
Amount of Each Disbursement this Period

Memo Item Earmark by (see memo entries) PAC limits unaffected

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Wisconsin Medical Society Political Action Committee**

**A. Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial)  
Glenn Grothman

Date of Disbursement: 07 / 12 / 2018

Mailing Address: P.O. Box 1215

City: Fond du Lac, State: WI, Zip Code: 54936

Purpose of Disbursement: Earmark by Sri Vasudevan; PAC limits unaffected

Candidate Name: Grothman, Glenn, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2017,  Primary,  General,  Other (specify) ▼

State: WI, District: 00

FEC Identification Number: C00561597  
Transaction ID: 9780117  
Amount of Each Disbursement this Period: 50.00  
 Memo Item

**B. Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial)  
Glenn Grothman

Date of Disbursement: 07 / 12 / 2018

Mailing Address: P.O. Box 1215

City: Fond du Lac, State: WI, Zip Code: 54936

Purpose of Disbursement: Earmark by Don Lee; PAC limits unaffected

Candidate Name: Grothman, Glenn, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2017,  Primary,  General,  Other (specify) ▼

State: WI, District: 00

FEC Identification Number: C00561597  
Transaction ID: 9780119  
Amount of Each Disbursement this Period: 100.00  
 Memo Item

**C. Leah for Senate**

Full Name (Last, First, Middle Initial)  
Leah Vukmir

Date of Disbursement: 07 / 09 / 2018

Mailing Address: P.O. Box 488

City: Brookfield, State: WI, Zip Code: 53008

Purpose of Disbursement: Earmark by Don Lee; PAC limits unaffected

Candidate Name: Vukmir, Leah, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2017,  Primary,  General,  Other (specify) ▼

State: WI, District: 00

FEC Identification Number: C00655522  
Transaction ID: 9780124  
Amount of Each Disbursement this Period: 250.00  
 Memo Item Earmark by Don Lee; PAC limits unaffected

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1450.00