

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

Office Use Only

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

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

☐Check if different
than previously
reported. (ACC)

Madison

WI

53703

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00074450

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2010

through

07

31

2010

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

Type or Print Name of Treasurer

Cathy Stepp

Signature of Treasurer

Electronically Filed by Cathy Stepp

Date

08

20

2010

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	353297.24
(b) Cash on Hand at Beginning of Reporting Period	399257.75	
(c) Total Receipts (from Line 19)	163994.08	956525.64
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	563251.83	1309822.88
7. Total Disbursements (from Line 31)	181803.89	928374.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	381447.94	381447.94
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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	45220.00	237391.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	55824.08	482876.32
(iii) TOTAL (add Lines 11(a)(i) and (ii)	101044.08	720267.32
(b) Political Party Committees	48300.00	68800.00
(c) Other Political Committees (such as PACs)	14650.00	78300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	163994.08	867367.32
12. Transfers From Affiliated/Other Party Committees	0.00	83874.12
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	2284.20
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	3000.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	3000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	163994.08	956525.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	163994.08	953525.64

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	4407.02	43703.65	
(ii) Non-Federal Share.....	16578.83	125730.50	
(b) Other Federal Operating Expenditures.....	76467.87	321082.84	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	97453.72	490516.99	
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 Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	1700.00	1700.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1700.00	1700.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	82650.17	436157.95	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	82650.17	436157.95	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	181803.89	928374.94	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	165225.06	802644.44	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	163994.08	867367.32
34. Total Contribution Refunds (from Line 28(d))	1700.00	1700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	162294.08	865667.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	80874.89	364786.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2284.20
38. Net Operating Expenditures (subtract Line 37 from Line 36)	80874.89	362502.29

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

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

FOR LINE NUMBER: PAGE 6 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Mary Helen Arett

Mailing Address 1900 Hawthorne Heights Dr.

City

De Pere

State

WI

Zip Code

54115-9239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.102538

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kevin Audette

Mailing Address 1761 Wietzel Ave

City

Oshkosh

State

WI

Zip Code

54902-5552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102178

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

David Bahl

Mailing Address 2001 S Prairie Ave

City

Waukesha

State

WI

Zip Code

53189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weldall Manufacturing

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.102032

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Ione Berg

Mailing Address 3120 N Casaloma Dr

City

Appleton

State

WI

Zip Code

54913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fox Valley Tech College

Occupation

Food service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	9	/	2	0	1	0

Transaction ID: SA11AI.102181

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Anne Bolz

Mailing Address 411 Summit Rd

City

Madison

State

WI

Zip Code

53704-6072

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	0

Transaction ID: SA11AI.102516

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Nancy Brakebush

Mailing Address W7266 Fern Rd.

City

Oxford

State

WI

Zip Code

53952-8968

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: SA11AI.101506

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Andrea Bryant

Mailing Address 108 N. Barstow St

City

Waukesha

State

WI

Zip Code

53186-4928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.102376

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Burke

Mailing Address 7710 N. Merrie Ln

City

Milwaukee

State

WI

Zip Code

53217-2962

FEC ID number of contributing
federal political committee.

C

Name of Employer
Real Estate

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102150

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Kathryn Burke

Mailing Address 7710 N Merrie Lane

City

Fox Point

State

WI

Zip Code

53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Housewife

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102092

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 9 / 95

(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

A.

Full Name (Last, First, Middle Initial)

R.G. Chamberlain

Mailing Address W2728 Oakwood Beach Rd

City

Markesan

State

WI

Zip Code

53946

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requested

Occupation

Information requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.100910

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

David Cookson

Mailing Address 4910 Lake Mendota Dr

City

Madison

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.102622

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Wolfgang Dörner

Mailing Address PO Box 655

City

Hartland

State

WI

Zip Code

53029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dörner Mfg.

Occupation

Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.102842

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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 10 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Joseph Ellis

Mailing Address 3205 N. Marietta Avenue

City

Milwaukee

State

WI

Zip Code

53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.102573

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Richard Feller

Mailing Address 2618 22nd Ave

City

Monroe

State

WI

Zip Code

53566

FEC ID number of contributing
federal political committee.

C

Name of Employer
Monroe Truck Equipment

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.102619

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Forest County Potawatomi Community

Mailing Address PO 340

City

Crandon

State

WI

Zip Code

54520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: SA11AI.101033

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Forest County Potawatomi Community

Mailing Address PO 340

City

Crandon

State

WI

Zip Code

54520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID: SA11AI.103164

Amount of Each Receipt this Period

3000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Forest County Potawatomi Community

Mailing Address PO 340

City

Crandon

State

WI

Zip Code

54520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.103165

Amount of Each Receipt this Period

3000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

William Greaves

Mailing Address 8851 N. Bayside Drive

City

Bayside

State

WI

Zip Code

53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical College of Wisconsin

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.102868

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

6500.00

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 12 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Donald Jauquet

Mailing Address 2373 Jourdain Lane

City

Green Bay

State

WI

Zip Code

54301-2137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schneider National

Occupation

Transportation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.102787

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jane Johnson

Mailing Address 5171 Island View Drive

City

Oshkosh

State

WI

Zip Code

54901-1355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.103065

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Ron Johnson

Mailing Address 5171 Island View Drive

City

Oshkosh

State

WI

Zip Code

54901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rexam Extrusion, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.103142

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

20250.00

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 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Paul Jones

Mailing Address 7950 N Lake Dr

City

Bayside

State

WI

Zip Code

53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requestedOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	0

Transaction ID: SA11AI.101852

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Brian Knox

Mailing Address 421 Milwaukee Ave

City

Fort Atkinson

State

WI

Zip Code

53538

FEC ID number of contributing
federal political committee.

C

Name of Employer
WD Hoard & Sons CoOccupation
Publisher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.101682

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Kevin Kraemer

Mailing Address 720 Westbrook Drive

City

Plain

State

WI

Zip Code

53577-9787

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Transaction ID: SA11AI.103031

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1350.00

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 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Mr. Martin Kraemer

Mailing Address 870 Westbrook Dr

City

Plain

State

WI

Zip Code

53577-9788

FEC ID number of contributing
federal political committee.

C

Name of Employer
Estimator

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.103020

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Norman Kraemer

Mailing Address 1115 Oak St

City

Plain

State

WI

Zip Code

53577-9771

FEC ID number of contributing
federal political committee.

C

Name of Employer
Contractor

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.102978

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ryan Kraemer

Mailing Address 7399 Cedar Crest Drive

City

Sauk City

State

WI

Zip Code

53583-9710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.102980

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 15 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas Kraemer

Mailing Address 1825 Crestwood Dr

City

Plain

State

WI

Zip Code

53577-9643

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pres./owner

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.103043

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Eleanor Lee

Mailing Address 1930 W. River Bend Court

City

Mequon

State

WI

Zip Code

53092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Logemann Brothers Co.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.101445

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Vincent Limmex

Mailing Address 4950 County Rd C

City

Spring Green

State

WI

Zip Code

53588

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.102464

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

435.00

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 16 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Charles Mayer

Mailing Address 318 Fond du Lac Ave

City

Eden

State

WI

Zip Code

53019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.102190

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Richard Merske

Mailing Address W249N7480 Hillside Rd

City

Sussex

State

WI

Zip Code

53089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.101706

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

James Nellen

Mailing Address 10315 N Waterleaf Ct

City

Mequon

State

WI

Zip Code

53092-6198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michael Best & Friedrich

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	9	/	2	0	1	0

Transaction ID: SA11AI.102064

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

450.00

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 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Milton Neshek

Mailing Address 1335 North Geneva National Avenue

City

Lake Geneva

State

WI

Zip Code

53147

FEC ID number of contributing
federal political committee.

C

Name of Employer
Milton E. Neshek, LLCOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.102821

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Dale Nordeen

Mailing Address 4206 Yuma Dr.

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.100800

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Beverly Oashgar

Mailing Address 306 N. Segoe Rd Apt 103

City

Madison

State

WI

Zip Code

53705-4965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Uw MadisonOccupation
Rsrch Gardnr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.101290

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

280.00

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 18 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Mrs. Beverly Oashgar

Mailing Address 306 N. Segoe Rd Apt 103

City

Madison

State

WI

Zip Code

53705-4965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Uw Madison

Occupation

Rsrch Gardnr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.101871

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Greg Pauly

Mailing Address 1711 Circle Drive

City

New Holstein

State

WI

Zip Code

53061

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102114

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

R. Preston

Mailing Address 4505 Hillside Rd

City

Elm Grove

State

WI

Zip Code

53122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.102550

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

855.00

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 / 95

(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

A.

Full Name (Last, First, Middle Initial)

James Raffel

Mailing Address 2006 N 24th St

City

Sheboygan

State

WI

Zip Code

53081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.102323

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Maurice Reese

Mailing Address 713 Lakewood Boulevard

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.103015

Amount of Each Receipt this Period

1250.00

C.

Full Name (Last, First, Middle Initial)

Ernest Reynolds

Mailing Address 17 Red Maple Trail

City

Madison

State

WI

Zip Code

53717

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.102736

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1450.00

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 20 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Mrs. Jeanette Rodeghier

Mailing Address 1440 Township Ave

City

Wisconsin Rapids

State

WI

Zip Code

54494-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.101680

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert L. Roesler

Mailing Address 4035 S. 84th St

City

Greenfield

State

WI

Zip Code

53228-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homes for Independent Living

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.101015

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Robert Schaefer

Mailing Address 2323 N. Mayfair Road STE 490

City

Wauwatosa

State

WI

Zip Code

53226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102112

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

825.00

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 21 / 95

(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

A.

Full Name (Last, First, Middle Initial)

William St. Aubin

Mailing Address 7461 Saint Aubin Ln

City

Oconto Falls

State

WI

Zip Code

54154

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.102831

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Stockbridge-Munsee Community

Mailing Address N8705 Mohheconnuck Road

City

Bowler

State

WI

Zip Code

54416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.103171

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Gary Underwood

Mailing Address 6534 Clover Rd

City

Manitowoc

State

WI

Zip Code

54220-9273

FEC ID number of contributing
federal political committee.

C

Name of Employer
VP Technology

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102102

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1075.00

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 22 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Faye Waclawski

Mailing Address 1879 Shady Ln

City

Grafton

State

WI

Zip Code

53024-9526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102070

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Faye Waclawski

Mailing Address 1879 Shady Ln

City

Grafton

State

WI

Zip Code

53024-9526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.103129

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Kimberly Wallner

Mailing Address 620 Wild Oak Dr

City

Manitowoc

State

WI

Zip Code

54220

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.102108

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1200.00

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 / 95

(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

A.

Full Name (Last, First, Middle Initial)

Ronald Ward

Mailing Address PO Box 306

City

Balsam Lake

State

WI

Zip Code

54810-0306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Balsam Beach Resort

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.102735

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Walter Wartolec

Mailing Address 927 Cornell Court

City

Madison

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blackhawk Investments

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.100943

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

45220.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 95

(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	---	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.Full Name (Last, First, Middle Initial)
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing
federal political committee.**C** C00003418

Name of Employer

Occupation

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

132174.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	0

Transaction ID: SA11B.100787

Amount of Each Receipt this Period

48300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

48300.00

TOTAL This Period (last page this line number only)

48300.00

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

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

FOR LINE NUMBER: PAGE 25 / 95

(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

A.

Full Name (Last, First, Middle Initial)

3M COMPANY PAC

Mailing Address 3M Center Building 224-6S-03

City State Zip Code
St. Paul MN 55144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Transaction ID: SA11C.103157

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Mailing Address CNA PLAZA - CORPORATE TAX (24S)

City State Zip Code
CHICAGO IL 60685

FEC ID number of contributing
federal political committee.

C

C00078287

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11C.103155

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE

Mailing Address One Johnson & Johnson Plaza

City State Zip Code
New Brunswick NJ 08933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3350.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Transaction ID: SA11C.103158

Amount of Each Receipt this Period

1650.00

SUBTOTAL of Receipts This Page (optional)

7650.00

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 26 / 95

(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

A.

Full Name (Last, First, Middle Initial)

MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (MEPAC)

Mailing Address P.O. Box 75000, MC 2250

City State Zip Code
 Detroit MI 48275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 4 / 2 0 1 0

Transaction ID: SA11C.103159

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (MEPAC)

Mailing Address P.O. Box 75000, MC 2250

City State Zip Code
 Detroit MI 48275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11C.103160

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYPersonal Receipt

Mailing Address Three Park Place

City State Zip Code
 Annapolis MD 21401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11C.103162

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

14650.00

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)

PAGE 27 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) AirTran Airways	Transaction ID: SB21B.103206 Date of Disbursement																				
Mailing Address 9955 AirTran Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
City Orlando State FL Zip Code 32827	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: airfare	<table border="1"> <tr> <td colspan="10">318.90</td> </tr> </table>	318.90																			
318.90																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Amazon.com	Transaction ID: SB21B.103191 Date of Disbursement																				
Mailing Address 1850 Mercer Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	7		2	0	1	0												
City Lexington State KY Zip Code 40511	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: Office supplies	<table border="1"> <tr> <td colspan="10">9.99</td> </tr> </table>	9.99																			
9.99																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Amazon.com	Transaction ID: SB21B.103197 Date of Disbursement																				
Mailing Address 1850 Mercer Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	8		2	0	1	0												
City Lexington State KY Zip Code 40511	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: office supplies	<table border="1"> <tr> <td colspan="10">67.98</td> </tr> </table>	67.98																			
67.98																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Apple Online Store	Transaction ID: SB21B.103192 Date of Disbursement																				
Mailing Address 1 Infinite Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	8		2	0	1	0												
City Cupertino State CA Zip Code 95014	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: Office supplies	<table border="1"> <tr> <td>3</td><td>1</td><td>6</td><td>4</td> </tr> </table>	3	1	6	4																
3	1	6	4																		
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) Audiomicro	Transaction ID: SB21B.103199 Date of Disbursement																				
Mailing Address 13351-D Riverside Dr #219	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	7		2	0	1	0												
City Sherman Oaks State CA Zip Code 91423	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: Audio	<table border="1"> <tr> <td>5</td><td>9</td><td>9</td><td>9</td> </tr> </table>	5	9	9	9																
5	9	9	9																		
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) Audiomicro	Transaction ID: SB21B.103205 Date of Disbursement																				
Mailing Address 13351-D Riverside Dr #219	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
City Sherman Oaks State CA Zip Code 91423	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: Audio	<table border="1"> <tr> <td>1</td><td>6</td><td>9</td><td>9</td> </tr> </table>	1	6	9	9																
1	6	9	9																		
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Audiomicro	Transaction ID: SB21B.103211 Date of Disbursement																				
Mailing Address 13351-D Riverside Dr #219	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	4		2	0	1	0												
City Sherman Oaks State CA Zip Code 91423 Purpose of Disbursement 7/30 cc pmt: Audio Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>5</td><td>9</td><td>.</td><td>9</td><td>9</td> </tr> </table>	5	9	.	9	9															
5	9	.	9	9																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Campaign Now	Transaction ID: SB21B.100720 Date of Disbursement																				
Mailing Address 1126 S 70th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
City Milwaukee State WI Zip Code 53214 Purpose of Disbursement voip phones Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>7</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	7	0	.	0	0															
7	0	.	0	0																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Championship Awards	Transaction ID: SB21B.103179 Date of Disbursement																				
Mailing Address 2813 Royal Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	2		2	0	1	0												
City Madison State WI Zip Code 53713 Purpose of Disbursement 7/13 cc pmt: Awards Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>7</td><td>4</td><td>.</td><td>4</td><td>7</td> </tr> </table>	7	4	.	4	7															
7	4	.	4	7																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 30 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Charter Communications

Mailing Address PO Box 3255

City Milwaukee State WI Zip Code 53201-0000

Purpose of Disbursement
Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.100783

Date of Disbursement

/ /

Amount of Each Disbursement this Period

551.75

B.

Full Name (Last, First, Middle Initial)
Comfort Suites

Mailing Address 1951 Bond Street

City Green Bay State WI Zip Code 54303

Purpose of Disbursement
7/30 cc pmt: Hotel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.103215

Date of Disbursement

/ /

Amount of Each Disbursement this Period

97.03

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Michael Dailey

Mailing Address 363 Richland Ave

City Athens State WI Zip Code 45701

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.100774

Date of Disbursement

/ /

Amount of Each Disbursement this Period

202.56

SUBTOTAL of Disbursements This Page (optional)

754.31

TOTAL This Period (last page this line number only)

C. Form/Schedule : **SB21B** \$174.56 Mileage; \$28.00 Office expenses
Transaction ID : **SB21B.100774**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Dan Morse Consulting LLC

Mailing Address 5636 Nutone St

City Fitchburg State WI Zip Code 53711-0000

Purpose of Disbursement
Fundraising consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100762

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Andrew Davis

Mailing Address 2525 S Shore Dr

City Milwaukee State WI Zip Code 53207-0000

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100768

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Andrew Davis

Mailing Address 2525 S Shore Dr

City Milwaukee State WI Zip Code 53207-0000

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100775

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

9850.53

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SB21B** \$254.35 Mileage; \$50 Cell Phone reimbursement
Transaction ID : **SB21B.100768**

C. Form/Schedule : **SB21B** \$419.18 Mileage; \$127.00 Expenses
Transaction ID : **SB21B.100775**

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Nicholas DeJong Mailing Address 116 Damon Circle Unit L	Transaction ID: SB21B.100770 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Panama City Beach State FL Zip Code 32407 Purpose of Disbursement Expense reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>204.05</div>
B. Full Name (Last, First, Middle Initial) Nicholas DeJong Mailing Address 116 Damon Circle Unit L City Panama City Beach State FL Zip Code 32407 Purpose of Disbursement Expense reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.100786 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>26.88</div>
C. Full Name (Last, First, Middle Initial) Domain Hosting Services Mailing Address 900 W Grove Pkwy City Tempe State AZ Zip Code 85283 Purpose of Disbursement 7/30 cc pmt: Hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.103213 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>79.99</div> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

230.93

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B** \$87.08 Mileage; \$116.97 Office expenses
Transaction ID : **SB21B.100770**

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Domino's Pizza - La Crosse

Mailing Address 2402 State Rd

City LaCrosse State WI Zip Code 54601

Purpose of Disbursement
7/13 cc pmt: Meeting expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103183

Date of Disbursement

/ /

Amount of Each Disbursement this Period

152.89

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
eDonation

Mailing Address 118 North Saint Asaph St.

City Alexandria State VA Zip Code 22314-0000

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100644

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.80

C.

Full Name (Last, First, Middle Initial)
FedEx

Mailing Address PO Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100634

Date of Disbursement

/ /

Amount of Each Disbursement this Period

306.65

SUBTOTAL of Disbursements This Page (optional)

311.45

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 37 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin**A.**Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 654 W Washington Ave

City Madison State WI Zip Code 53703

Purpose of Disbursement
7/30 cc pmt: printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.103196

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	1	0

Amount of Each Disbursement this Period

52.70

[MEMO ITEM]**B.**Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 654 W Washington Ave

City Madison State WI Zip Code 53703

Purpose of Disbursement
7/13 cc pmt: Printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.103185

Date of Disbursement

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

Amount of Each Disbursement this Period

505.98

[MEMO ITEM]**C.**Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 654 W Washington Ave

City Madison State WI Zip Code 53703

Purpose of Disbursement
7/30 cc pmt: Printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.103208

Date of Disbursement

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

Amount of Each Disbursement this Period

77.62

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB21B.100657 Date of Disbursement
Mailing Address 7300 Hudson Blvd #270	<div> <div>07</div> <div>15</div> <div>2010</div> </div>
City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
Purpose of Disbursement conference calls Candidate Name	<div>349.41</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB21B.100706 Date of Disbursement
Mailing Address 7300 Hudson Blvd #270	<div> <div>07</div> <div>29</div> <div>2010</div> </div>
City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
Purpose of Disbursement Prospecting calls Candidate Name	<div>5859.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB21B.100711 Date of Disbursement
Mailing Address 7300 Hudson Blvd #270	<div> <div>07</div> <div>30</div> <div>2010</div> </div>
City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
Purpose of Disbursement Conference calls Candidate Name	<div>415.95</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6624.36

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

GoDaddy.com

Mailing Address 14455 N. Hayden Rd. #219

City State Zip Code
Scottsdale AZ 85260

Purpose of Disbursement
7/30 cc pmt: domain registration

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103212

Date of Disbursement

05 / 27 / 2010

Amount of Each Disbursement this Period

4.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Google

Mailing Address 1600 Amphitheatre Pkwy

City State Zip Code
Mountain View CA 94043

Purpose of Disbursement
7/30 cc pmt: google adwords

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103201

Date of Disbursement

05 / 18 / 2010

Amount of Each Disbursement this Period

143.74

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

gotowebinar.com

Mailing Address 6500 Hollister Ave

City State Zip Code
Goleta CA 93117

Purpose of Disbursement
7/13 cc pmt: Webinar software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103180

Date of Disbursement

05 / 13 / 2010

Amount of Each Disbursement this Period

948.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Hatchery Hill Investment, LLC

Mailing Address 2000 Cahill Main, Suite 216

City Fitchburg State WI Zip Code 53711

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100779

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Hatchery Hill Investment, LLC

Mailing Address 2000 Cahill Main, Suite 216

City Fitchburg State WI Zip Code 53711

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100781

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Heinzen Printing Inc.

Mailing Address P.O. Box 267

City Marshfield State WI Zip Code 54449

Purpose of Disbursement
Business cards

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100660

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2344.31

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

FEC Schedule B (Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Karl's Event Rental

Mailing Address 7000 South 10th Street

City State Zip Code
Oak Creek WI 53154

Purpose of Disbursement
7/30 cc pmt: meeting rentals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.103209

Date of Disbursement

/ /

Amount of Each Disbursement this Period

397.18

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Kimbria Inc.

Mailing Address 1050 E 11th St, Ste 200

City State Zip Code
Austin TX 78712

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.100704

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Nicholas Lauren

Mailing Address S8338 Oriole Dr

City State Zip Code
Eau Claire WI 54701

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.100771

Date of Disbursement

/ /

Amount of Each Disbursement this Period

214.41

SUBTOTAL of Disbursements This Page (optional)

314.41

TOTAL This Period (last page this line number only)

C. Form/Schedule : **SB21B**
Transaction ID : **SB21B.100771**

\$53.78 Mileage; \$160.63 Office expenses

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Crystal Lee

Mailing Address 614 Langdon Street

City Madison State WI Zip Code 53703-1163

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100772

Date of Disbursement

/ /

Amount of Each Disbursement this Period

326.58

B.

Full Name (Last, First, Middle Initial)

Crystal Lee

Mailing Address 614 Langdon Street

City Madison State WI Zip Code 53703-1163

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100776

Date of Disbursement

/ /

Amount of Each Disbursement this Period

258.13

C.

Full Name (Last, First, Middle Initial)

M&I Bank

Mailing Address 1 E Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement
bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100764

Date of Disbursement

/ /

Amount of Each Disbursement this Period

45.00

SUBTOTAL of Disbursements This Page (optional)

629.71

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B** \$92.74 Mileage; \$233.84 Office expenses
Transaction ID : **SB21B.100772**

B. Form/Schedule : **SB21B** \$187.11 Mileage; \$71.02 Office expenses
Transaction ID : **SB21B.100776**

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
M&I Bank

Mailing Address 1 E Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement
bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100627

Date of Disbursement

/ /

Amount of Each Disbursement this Period

45.00

B.

Full Name (Last, First, Middle Initial)
M&I Bank

Mailing Address 1 E Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100700

Date of Disbursement

/ /

Amount of Each Disbursement this Period

359.71

C.

Full Name (Last, First, Middle Initial)
M&I Bank

Mailing Address 1 E Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement
bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.00

SUBTOTAL of Disbursements This Page (optional)

463.71

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) M&I Bank Mailing Address 1 E Main St	Transaction ID: SB21B.100780 Date of Disbursement <div> <div>07</div> <div>22</div> <div>2010</div> </div>
City Madison State WI Zip Code 53703-0000 Purpose of Disbursement Stop payment fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>31.00</div>
B. Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center Mailing Address Credit Card Processing Center City Milwaukee State WI Zip Code 53201 Purpose of Disbursement Credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.100653 Date of Disbursement <div> <div>07</div> <div>13</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>9930.22</div>
C. Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center Mailing Address Credit Card Processing Center City Milwaukee State WI Zip Code 53201 Purpose of Disbursement credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.100714 Date of Disbursement <div> <div>07</div> <div>30</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>4455.12</div>

SUBTOTAL of Disbursements This Page (optional)

14416.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
M&I Merchant Services

Mailing Address PO Box 1111

City Madison State WI Zip Code 53701-0000

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100642

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.78

B.

Full Name (Last, First, Middle Initial)
M&I Merchant Services

Mailing Address PO Box 1111

City Madison State WI Zip Code 53701-0000

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100649

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)
M&I Merchant Services

Mailing Address PO Box 1111

City Madison State WI Zip Code 53701-0000

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100651

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.80

SUBTOTAL of Disbursements This Page (optional)

458.58

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.100763 Date of Disbursement
Mailing Address PO Box 1111	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53701-0000	Amount of Each Disbursement this Period
Purpose of Disbursement credit card processing fee Candidate Name	<div> <div>15.95</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mr. B's a Bartolotta	Transaction ID: SB21B.103187 Date of Disbursement
Mailing Address 18380 W Capitol Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 7 / 2 0 1 0</div> </div>
City Brookfield State WI Zip Code 53045	Amount of Each Disbursement this Period
Purpose of Disbursement 7/13 cc pmt: Meeting expense Candidate Name	<div> <div>345.35</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Next Chapter Bookshop	Transaction ID: SB21B.103176 Date of Disbursement
Mailing Address 10976 North Port Washington Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 1 0</div> </div>
City Mequon State WI Zip Code 53092	Amount of Each Disbursement this Period
Purpose of Disbursement 7/13 cc pmt: Books Candidate Name	<div> <div>4667.88</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

15.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: SB21B.103184 Date of Disbursement																				
Mailing Address PO Box 9027	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
City Des Moines State IA Zip Code 50368	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/13 cc pmt: Office supplies	<table border="1"> <tr> <td colspan="10">568.99</td> </tr> </table>	568.99																			
568.99																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.103177 Date of Disbursement																				
Mailing Address #774100, 4100 Solutions Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	2		2	0	1	0												
City Chicago State IL Zip Code 60677-4001	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/13 cc pmt: Payroll processing fee	<table border="1"> <tr> <td colspan="10">19.95</td> </tr> </table>	19.95																			
19.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.103195 Date of Disbursement																				
Mailing Address #774100, 4100 Solutions Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	7		2	0	1	0												
City Chicago State IL Zip Code 60677-4001	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: credit card processing	<table border="1"> <tr> <td colspan="10">49.95</td> </tr> </table>	49.95																			
49.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) PDQ Store #135	Transaction ID: SB21B.103210 Date of Disbursement																				
Mailing Address 401 N 3rd Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	3		2	0	1	0												
City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period																				
Purpose of Disbursement 7/30 cc pmt: gas	<table border="1"> <tr> <td colspan="10">40.67</td> </tr> </table>	40.67																			
40.67																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Pinnacle Direct Inc	Transaction ID: SB21B.100724 Date of Disbursement																				
Mailing Address 4115 Drew Avenue South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	1	0												
City Minneapolis State MN Zip Code 55410	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage for finance mailing	<table border="1"> <tr> <td colspan="10">4421.05</td> </tr> </table>	4421.05																			
4421.05																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp	Transaction ID: SB21B.100663 Date of Disbursement																				
Mailing Address PO Box 85460	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	0												
City Louisville State KY Zip Code 40285	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage meter lease	<table border="1"> <tr> <td colspan="10">786.09</td> </tr> </table>	786.09																			
786.09																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5207.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Plaza Hotel

Mailing Address 1202 W. Clairemont Ave

City Eau Claire State WI Zip Code 54701

Purpose of Disbursement
7/13 cc pmt: Meeting expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103181

Date of Disbursement

05 / 15 / 2010

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Plaza Hotel

Mailing Address 1202 W. Clairemont Ave

City Eau Claire State WI Zip Code 54701

Purpose of Disbursement
7/30 cc pmt: Hotel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103204

Date of Disbursement

05 / 18 / 2010

Amount of Each Disbursement this Period

165.83

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
business reply mail postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100703

Date of Disbursement

07 / 20 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Purchase Power

Mailing Address Po Box 856042

City State Zip Code
Louisville KY 40285

Purpose of Disbursement
Postage for meter

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100716

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3099.51

B.

Full Name (Last, First, Middle Initial)
Reindl Printing

Mailing Address PO Box 317

City State Zip Code
Merrill WI 54452

Purpose of Disbursement
Banner printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100636

Date of Disbursement

/ /

Amount of Each Disbursement this Period

269.04

C.

Full Name (Last, First, Middle Initial)
Rock Garden Supper Club

Mailing Address 1951 Bond Street

City State Zip Code
Green Bay WI 54303

Purpose of Disbursement
7/13 cc pmt: Meeting expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103189

Date of Disbursement

/ /

Amount of Each Disbursement this Period

281.06

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3368.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Nicholas Smalley	Transaction ID: SB21B.100777 Date of Disbursement
Mailing Address 118 S Washington St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Green Bay State WI Zip Code 54301 Purpose of Disbursement Expense reimbursement Candidate Name	Amount of Each Disbursement this Period <div>468.20</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) TDS Metrocom	Transaction ID: SB21B.100784 Date of Disbursement
Mailing Address PO Box 94510	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Palatine State IL Zip Code 60094-0000 Purpose of Disbursement Office phones Candidate Name	Amount of Each Disbursement this Period <div>407.22</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) The Tarrance Group	Transaction ID: SB21B.100766 Date of Disbursement
Mailing Address 201 North Union Street STE 410	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22314 Purpose of Disbursement Polling retainer Candidate Name	Amount of Each Disbursement this Period <div>10000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

10875.42

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B** \$288.64 Mileage; \$179.56 Office expenses
Transaction ID : **SB21B.100777**

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Time Warner Cable	Transaction ID: SB21B.100785 Date of Disbursement
Mailing Address PO Box 145	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City State Zip Code Kimberly WI 54136-0145	Amount of Each Disbursement this Period
Purpose of Disbursement Cable	<div> <div></div> <div>1044.93</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Tusk Mobile LLC	Transaction ID: SB21B.100721 Date of Disbursement
Mailing Address 2000 Massachusetts Ave NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City State Zip Code Washington DC 20036	Amount of Each Disbursement this Period
Purpose of Disbursement Text messaging	<div> <div></div> <div>1625.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.100638 Date of Disbursement
Mailing Address 105 E Wisconsin Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 1 0</div> </div>
City State Zip Code Oconomowoc WI 53066-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Finance mailing	<div> <div></div> <div>5000.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

7669.93

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)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin**A.**Full Name (Last, First, Middle Initial)
Unisource Direct

Mailing Address 105 E Wisconsin Ave

City Oconomowoc State WI Zip Code 53066-0000

Purpose of Disbursement
Finance mailing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.100645

Date of Disbursement

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

Amount of Each Disbursement this Period

5870.93

B.Full Name (Last, First, Middle Initial)
Unisource Direct

Mailing Address 105 E Wisconsin Ave

City Oconomowoc State WI Zip Code 53066-0000

Purpose of Disbursement
Finance mailing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.100718

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	0

Amount of Each Disbursement this Period

2872.73

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

Mailing Address 8333 W. Greenfield Ave.

City West Allis State WI Zip Code 53214

Purpose of Disbursement
7/30 cc pmt: office supplies

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.103207

Date of Disbursement

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

Amount of Each Disbursement this Period

15.61

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

8743.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Walgreens	Transaction ID: SB21B.103214 Date of Disbursement
Mailing Address 8333 W. Greenfield Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 1 0</div> </div>
City West Allis State WI Zip Code 53214	Amount of Each Disbursement this Period
Purpose of Disbursement Office supplies	<div> <div></div> <div>394.31</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Walmart	Transaction ID: SB21B.103178 Date of Disbursement
Mailing Address 4198 Nakoosa Trail	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53714	Amount of Each Disbursement this Period
Purpose of Disbursement 7/13 cc pmt: Office supplies	<div> <div></div> <div>68.58</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Walmart	Transaction ID: SB21B.103198 Date of Disbursement
Mailing Address 4198 Nakoosa Trail	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 7 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53714	Amount of Each Disbursement this Period
Purpose of Disbursement 7/30 cc pmt: office supplies	<div> <div></div> <div>43.22</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue - Sls Tax

Mailing Address PO Box 93389

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Sales/Use tax

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.100701

Date of Disbursement

07 / 16 / 2010

Amount of Each Disbursement this Period

1050.98

B. Full Name (Last, First, Middle Initial)
Zing Media Solutions

Mailing Address 4548 Atherton Dr. Suite 240

City Salt Lake City State UT Zip Code 84123

Purpose of Disbursement

7/30 cc pmt: auto message

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.103202

Date of Disbursement

05 / 19 / 2010

Amount of Each Disbursement this Period

86.39

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1050.98

TOTAL This Period (last page this line number only)

75957.62

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

INTEGRYS ENERGY GROUP INC PAC

Mailing Address 130 E. Randolph Dr.

City
Chicago

State
IL

Zip Code
60601

Purpose of Disbursement
Returned Excess Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28C.100765

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1700.00

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

1700.00

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)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Employee simple IRA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.100635

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2010

Amount of Each Disbursement this Period

540.65

B. Full Name (Last, First, Middle Initial)
American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Employee simple IRA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.100702

Date of Disbursement

M M / D D / Y Y Y Y
07 / 19 / 2010

Amount of Each Disbursement this Period

550.62

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

Mailing Address 250 Femrite Drive

City Madison State WI Zip Code 53716

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.100681

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

546.03

SUBTOTAL of Disbursements This Page (optional)

1637.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Dudley Bowlby Mailing Address 250 Femrite Drive	Transaction ID: SB30B.100738 Date of Disbursement <div> <div>07</div> <div>31</div> <div>2010</div> </div>
City Madison State WI Zip Code 53716 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>628.86</div>
B. Full Name (Last, First, Middle Initial) Matthew Brabender Mailing Address 3914 Rieder Road #1 City Madison State WI Zip Code 53704 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.100682 Date of Disbursement <div> <div>07</div> <div>15</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>467.94</div>
C. Full Name (Last, First, Middle Initial) Matthew Brabender Mailing Address 3914 Rieder Road #1 City Madison State WI Zip Code 53704 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.100739 Date of Disbursement <div> <div>07</div> <div>31</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>472.45</div>

SUBTOTAL of Disbursements This Page (optional)

1569.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Ashley M Burns	Transaction ID: SB30B.100673 Date of Disbursement
Mailing Address 420 W Gorham St #210	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>517.83</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ashley M Burns	Transaction ID: SB30B.100730 Date of Disbursement
Mailing Address 420 W Gorham St #210	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>609.83</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Molly Christianson	Transaction ID: SB30B.100672 Date of Disbursement
Mailing Address 5133 Woodfield Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Carmel State IN Zip Code 46033	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>881.65</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2009.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Molly Christianson

Mailing Address 5133 Woodfield Dr.

City Carmel State IN Zip Code 46033

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100729

Date of Disbursement

/ /

Amount of Each Disbursement this Period

949.69

B.

Full Name (Last, First, Middle Initial)
Tristan D. Cook

Mailing Address 2623 Pennington Circle

City Madison State WI Zip Code 53711

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100754

Date of Disbursement

/ /

Amount of Each Disbursement this Period

618.93

C.

Full Name (Last, First, Middle Initial)
Michael Dailey

Mailing Address 363 Richland Ave

City Athens State WI Zip Code 45701

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100767

Date of Disbursement

/ /

Amount of Each Disbursement this Period

177.88

SUBTOTAL of Disbursements This Page (optional)

1746.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Michael Dailey	Transaction ID: SB30B.100694 Date of Disbursement
Mailing Address 363 Richland Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Athens State WI Zip Code 45701	Amount of Each Disbursement this Period
Purpose of Disbursement payroll Candidate Name	<div> <div>994.21</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Michael Dailey	Transaction ID: SB30B.100755 Date of Disbursement
Mailing Address 363 Richland Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Athens State WI Zip Code 45701	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>1101.25</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Andrew Davis	Transaction ID: SB30B.100692 Date of Disbursement
Mailing Address 2525 S Shore Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Milwaukee State WI Zip Code 53207-0000	Amount of Each Disbursement this Period
Purpose of Disbursement payroll Candidate Name	<div> <div>1458.41</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3553.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Andrew Davis Mailing Address 2525 S Shore Dr	Transaction ID: SB30B.100753 Date of Disbursement <div> <div>07</div> <div>31</div> <div>2010</div> </div>
City Milwaukee State WI Zip Code 53207-0000 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1619.72</div>
B. Full Name (Last, First, Middle Initial) Dean Care Mailing Address PO Box 88610 City Milwaukee State WI Zip Code 53288 Purpose of Disbursement Health insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.100639 Date of Disbursement <div> <div>07</div> <div>02</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>4981.39</div>
C. Full Name (Last, First, Middle Initial) Dean Care Mailing Address PO Box 88610 City Milwaukee State WI Zip Code 53288 Purpose of Disbursement health insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.100643 Date of Disbursement <div> <div>07</div> <div>06</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>591.36</div>

SUBTOTAL of Disbursements This Page (optional)

7192.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Nicholas DeJong	Transaction ID: SB30B.100693 Date of Disbursement
Mailing Address 116 Damon Circle Unit L	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Panama City Beach State FL Zip Code 32407	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>947.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Nicholas DeJong	Transaction ID: SB30B.100756 Date of Disbursement
Mailing Address 116 Damon Circle Unit L	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Panama City Beach State FL Zip Code 32407	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1146.24</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.100640 Date of Disbursement
Mailing Address PO Box 828	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 1 0</div> </div>
City Stevens Point State WI Zip Code 54481	Amount of Each Disbursement this Period
Purpose of Disbursement Dental insurance	<div>430.97</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2524.71

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Thomas Dickens	Transaction ID: SB30B.100691 Date of Disbursement
	Mailing Address 420 W. Gorham St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
	City Madison State WI Zip Code 53703-2034	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>1332.95</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	
B.	Full Name (Last, First, Middle Initial) Thomas Dickens	Transaction ID: SB30B.100752 Date of Disbursement
	Mailing Address 420 W. Gorham St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
	City Madison State WI Zip Code 53703-2034	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement Payroll</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>1083.38</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	
C.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.100683 Date of Disbursement
	Mailing Address 126 North Blair Street #1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>1125.36</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	

SUBTOTAL of Disbursements This Page (optional)

3541.69

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.100740 Date of Disbursement
Mailing Address 126 North Blair Street #1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1115.99</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Amy Harriman	Transaction ID: SB30B.100679 Date of Disbursement
Mailing Address 544 W Main St #206	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>459.05</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Amy Harriman	Transaction ID: SB30B.100736 Date of Disbursement
Mailing Address 544 W Main St #206	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>428.02</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2003.06

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin**A.**

Full Name (Last, First, Middle Initial)

Donna Heimbach

Mailing Address 3002 Dianne Drive

City
MiddletonState
WIZip Code
53562Purpose of Disbursement
payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100684

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	0

Amount of Each Disbursement this Period

715.42

B.

Full Name (Last, First, Middle Initial)

Donna Heimbach

Mailing Address 3002 Dianne Drive

City
MiddletonState
WIZip Code
53562Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100741

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	0

Amount of Each Disbursement this Period

712.29

C.

Full Name (Last, First, Middle Initial)

Ashley Jacobs

Mailing Address 316 Winslow Adams

City
MadisonState
WIZip Code
53716Purpose of Disbursement
payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100698

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	0

Amount of Each Disbursement this Period

492.11

SUBTOTAL of Disbursements This Page (optional)

1919.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Ashley Jacobs

Mailing Address 316 Winslow Adams

City State Zip Code
Madison WI 53716

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100760

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

534.05

B.

Full Name (Last, First, Middle Initial)

Mark Jefferson

Mailing Address 1678 Cottonville Ave

City State Zip Code
Arkdale WI 54613-9614

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100671

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

2359.42

C.

Full Name (Last, First, Middle Initial)

Mark Jefferson

Mailing Address 1678 Cottonville Ave

City State Zip Code
Arkdale WI 54613-9614

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100728

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

2543.33

SUBTOTAL of Disbursements This Page (optional)

5436.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Matthew Kimble

Mailing Address 402 Nichols Rd

City Monona State WI Zip Code 53716

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100742
Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

260.53

B.

Full Name (Last, First, Middle Initial)
Brian Kind

Mailing Address 405 Doral Court

City Waunakee State WI Zip Code 53597

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100674
Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

1539.16

C.

Full Name (Last, First, Middle Initial)
Brian Kind

Mailing Address 405 Doral Court

City Waunakee State WI Zip Code 53597

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100731
Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

1713.21

SUBTOTAL of Disbursements This Page (optional)

3512.90

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Jason L Knack	Transaction ID: SB30B.100685 Date of Disbursement
Mailing Address 319 Locust St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Onalaska State WI Zip Code 54650	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>265.87</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jason L Knack	Transaction ID: SB30B.100744 Date of Disbursement
Mailing Address 319 Locust St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Onalaska State WI Zip Code 54650	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>46.83</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Nicholas Lauren	Transaction ID: SB30B.100695 Date of Disbursement
Mailing Address S8338 Oriole Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Eau Claire State WI Zip Code 54701	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>970.31</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1283.01

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Nicholas Lauren	Transaction ID: SB30B.100757 Date of Disbursement
Mailing Address S8338 Oriole Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Eau Claire State WI Zip Code 54701	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1143.42</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Crystal Lee	Transaction ID: SB30B.100696 Date of Disbursement
Mailing Address 614 Langdon Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-1163	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>970.31</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Crystal Lee	Transaction ID: SB30B.100758 Date of Disbursement
Mailing Address 614 Langdon Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-1163	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1145.81</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3259.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Larry Loomis

Mailing Address 762 Briar Ln

City State Zip Code
Beloit WI 53511-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100686

Date of Disbursement

/ /

Amount of Each Disbursement this Period

598.69

B.

Full Name (Last, First, Middle Initial)
Larry Loomis

Mailing Address 762 Briar Ln

City State Zip Code
Beloit WI 53511-0000

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100745

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.81

C.

Full Name (Last, First, Middle Initial)
David Luhman

Mailing Address 338 W Wilson St

City State Zip Code
Madison WI 53703-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100687

Date of Disbursement

/ /

Amount of Each Disbursement this Period

590.63

SUBTOTAL of Disbursements This Page (optional)

1590.13

TOTAL This Period (last page this line number only)

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

PAGE 76 / 95

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin**A.**

Full Name (Last, First, Middle Initial)

David Luhman

Mailing Address 338 W Wilson St

City
MadisonState
WIZip Code
53703-0000Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100746

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	0

Amount of Each Disbursement this Period

664.81

B.

Full Name (Last, First, Middle Initial)

Lucas Moench

Mailing Address 1022 W Johnson #602

City
MadisonState
WIZip Code
53715-0000Purpose of Disbursement
payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100699

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	0

Amount of Each Disbursement this Period

631.37

C.

Full Name (Last, First, Middle Initial)

Lucas Moench

Mailing Address 1022 W Johnson #602

City
MadisonState
WIZip Code
53715-0000Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100761

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	0

Amount of Each Disbursement this Period

596.92

SUBTOTAL of Disbursements This Page (optional) ►

1893.10

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.100668 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll processing fee	<div> <div></div> <div>107.21</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.100669 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll tax	<div> <div></div> <div>9831.12</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.100670 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll tax	<div> <div></div> <div>752.82</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

10691.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.100725 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement payroll processing fee Candidate Name	<div> <div>104.51</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.100726 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement unemployment tax Candidate Name	<div> <div>707.49</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.100727 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement payroll tax Candidate Name	<div> <div>10882.16</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

11694.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Scott Poole

Mailing Address 1528 Sellery Street

City Middleton State WI Zip Code 53562-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100688

Date of Disbursement

/ /

Amount of Each Disbursement this Period

121.20

B.

Full Name (Last, First, Middle Initial)

Scott Poole

Mailing Address 1528 Sellery Street

City Middleton State WI Zip Code 53562-0000

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100747

Date of Disbursement

/ /

Amount of Each Disbursement this Period

220.23

C.

Full Name (Last, First, Middle Initial)

Principal Financial Group

Mailing Address PO Box 10372

City Des Moines State IA Zip Code 50306

Purpose of Disbursement
Life insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100641

Date of Disbursement

/ /

Amount of Each Disbursement this Period

366.65

SUBTOTAL of Disbursements This Page (optional)

708.08

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Daniel Resch

Mailing Address 2 Northridge Terrace Apt C

City Madison State WI Zip Code 53704

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.100748

Date of Disbursement

/ /

Amount of Each Disbursement this Period

489.04

B.

Full Name (Last, First, Middle Initial)
Lauren Schroeder

Mailing Address 1022 W. Johnson St.

City Madison State WI Zip Code 53715-1026

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.100676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

311.45

C.

Full Name (Last, First, Middle Initial)
Lauren Schroeder

Mailing Address 1022 W. Johnson St.

City Madison State WI Zip Code 53715-1026

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.100733

Date of Disbursement

/ /

Amount of Each Disbursement this Period

372.44

SUBTOTAL of Disbursements This Page (optional)

1172.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Nicholas Smalley

Mailing Address 118 S Washington St

City Green Bay State WI Zip Code 54301

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100773

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2010

Amount of Each Disbursement this Period

663.43

B.

Full Name (Last, First, Middle Initial)
Nicholas Smalley

Mailing Address 118 S Washington St

City Green Bay State WI Zip Code 54301

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100697

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

970.31

C.

Full Name (Last, First, Middle Initial)
Nicholas Smalley

Mailing Address 118 S Washington St

City Green Bay State WI Zip Code 54301

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100759

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

1136.35

SUBTOTAL of Disbursements This Page (optional)

2770.09

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB30B** \$200.23 Mileage
Transaction ID : **SB30B.100773**

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Brendan Sweeney

Mailing Address 1014 College Ct

City Madison State WI Zip Code 53715

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100677

Date of Disbursement

/ /

Amount of Each Disbursement this Period

527.70

B.

Full Name (Last, First, Middle Initial)
Brendan Sweeney

Mailing Address 1014 College Ct

City Madison State WI Zip Code 53715

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100734

Date of Disbursement

/ /

Amount of Each Disbursement this Period

468.51

C.

Full Name (Last, First, Middle Initial)
Anton Urso

Mailing Address 405 Nichols Rd

City Monona State WI Zip Code 53716

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100689

Date of Disbursement

/ /

Amount of Each Disbursement this Period

608.77

SUBTOTAL of Disbursements This Page (optional)

1604.98

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)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin**A.**

Full Name (Last, First, Middle Initial)

Anton Urso

Mailing Address 405 Nichols Rd

City
MononaState
WIZip Code
53716Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100750

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	0

Amount of Each Disbursement this Period

539.85

B.

Full Name (Last, First, Middle Initial)

Jonathan Wacławski

Mailing Address 315 N. Franklin St.

City
MadisonState
WIZip Code
53703-1580Purpose of Disbursement
payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100678

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	0

Amount of Each Disbursement this Period

1365.18

C.

Full Name (Last, First, Middle Initial)

Jonathan Wacławski

Mailing Address 315 N. Franklin St.

City
MadisonState
WIZip Code
53703-1580Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.100735

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	0

Amount of Each Disbursement this Period

2118.53

SUBTOTAL of Disbursements This Page (optional)

4023.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Andrew Welhouse

Mailing Address 718 Bear Claw Way #204

City Madison State WI Zip Code 53717

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100675

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

1655.27

B.

Full Name (Last, First, Middle Initial)
Andrew Welhouse

Mailing Address 718 Bear Claw Way #204

City Madison State WI Zip Code 53717

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100732

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

1620.31

C.

Full Name (Last, First, Middle Initial)
Joshua Wilson

Mailing Address 641 West Main Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100690

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

669.06

SUBTOTAL of Disbursements This Page (optional)

3944.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Joshua Wilson

Mailing Address 641 West Main Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100751

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

632.46

B.

Full Name (Last, First, Middle Initial)
Katilyn Ziebell

Mailing Address 1004 College Ct

City Madison State WI Zip Code 53715

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100680

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2010

Amount of Each Disbursement this Period

253.37

C.

Full Name (Last, First, Middle Initial)
Katilyn Ziebell

Mailing Address 1004 College Ct

City Madison State WI Zip Code 53715

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.100737

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2010

Amount of Each Disbursement this Period

481.29

SUBTOTAL of Disbursements This Page (optional)

1367.12

TOTAL This Period (last page this line number only)

82650.17

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

 PAGE 87 / 95
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Badgerland Chemical & Supply

Mailing Address

PO Box 620303

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement:
janitorial suppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

148540.20

Date 07 / 01 / 2010

Transaction ID: H4.100628

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.30		72.60		91.90

B. Full Name (Last, First, Middle Initial)
Dane County Treasurer

Mailing Address

PO Box 2999

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:
Property taxesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

154551.75

Date 07 / 01 / 2010

Transaction ID: H4.100629

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1262.43		4749.12		6011.55

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

Mailing Address

PO Box 740441

City	State	Zip Code
Atlanta	GA	30374-0000

Purpose of Disbursement:
Copier leaseCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

155535.67

Date 07 / 01 / 2010

Transaction ID: H4.100631

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
206.62		777.30		983.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1488.35		5599.02		7087.37

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)
DISBURSEMENT 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)
Office Depot

 Mailing Address
PO Box 9027

 City State Zip Code
Des Moines IA 50368

 Purpose of Disbursement:
Office supplies

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

156087.55

 Date MM / DD / YYYY
07 / 01 / 2010

Transaction ID: H4.100632

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.89		435.99		551.88

B. Full Name (Last, First, Middle Initial)
Verizon Wireless

 Mailing Address
PO Box 25505

 City State Zip Code
Lehigh Valley PA 18002

 Purpose of Disbursement:
Wireless internet

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

156150.92

 Date MM / DD / YYYY
07 / 01 / 2010

Transaction ID: H4.100633

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.31		50.06		63.37

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

 Mailing Address
PO Box 7005

 City State Zip Code
Madison WI 53707

 Purpose of Disbursement:
business reply mail fee

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

156735.92

 Date MM / DD / YYYY
07 / 12 / 2010

Transaction ID: H4.100650

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.85		462.15		585.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.05		948.20		1200.25

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) **DISBURSEMENT 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)
 AT&T

Mailing Address
 PO Box 9100

City State Zip Code
 Aurora IL 60507

Purpose of Disbursement:
 Long distance

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160336.67

Date M M / D D / Y Y Y Y
 07 / 15 / 2010

Transaction ID: H4.100654

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

756.16

2844.59

3600.75

B. Full Name (Last, First, Middle Initial)
 Charter Communications

Mailing Address
 PO Box 3255

City State Zip Code
 Milwaukee WI 53201-0000

Purpose of Disbursement:
 cable tv

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160407.04

Date M M / D D / Y Y Y Y
 07 / 15 / 2010

Transaction ID: H4.100655

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.78

55.59

70.37

C. Full Name (Last, First, Middle Initial)
 Coca Cola Enterprises

Mailing Address
 2335 Paysphere Circle

City State Zip Code
 Chicago IL 60674-0000

Purpose of Disbursement:
 Office soda

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160428.14

Date M M / D D / Y Y Y Y
 07 / 15 / 2010

Transaction ID: H4.100656

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.43

16.67

21.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

775.37

2916.85

3692.22

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)
DISBURSEMENT 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)
GE Capital

Mailing Address

PO Box 740441

City	State	Zip Code
Atlanta	GA	30374-0000

Purpose of Disbursement:
copier leaseCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

162422.57

Date 07 / 15 / 2010

Transaction ID: H4.100658

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
418.83		1575.60		1994.43

B. Full Name (Last, First, Middle Initial)
Green Valley Disposal

Mailing Address

P.O. Box 9001099

City	State	Zip Code
Louisville	KY	40290-0000

Purpose of Disbursement:
Waste removalCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

162554.87

Date 07 / 15 / 2010

Transaction ID: H4.100659

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.78		104.52		132.30

C. Full Name (Last, First, Middle Initial)
Impact Networking Inc.

Mailing Address

PO Box 3090

City	State	Zip Code
Milwaukee	WA	53202

Purpose of Disbursement:
tonerCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

162572.54

Date 07 / 15 / 2010

Transaction ID: H4.100661

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.71		13.96		17.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.32		1694.08		2144.40

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)
DISBURSEMENT 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)
MG&E

 Mailing Address
PO Box 1231

 City State Zip Code
Madison WI 53701

 Purpose of Disbursement:
energy bill

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

164284.86

 Date MM / DD / YYYY
07 / 15 / 2010

Transaction ID: H4.100662

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
359.59		1352.73		1712.32

B. Full Name (Last, First, Middle Initial)
Pro One Janitorial, Inc.

 Mailing Address
1101 Ashwaubenon St.

 City State Zip Code
Green Bay WI 54304-0000

 Purpose of Disbursement:
cleaning service

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

164784.86

 Date MM / DD / YYYY
07 / 15 / 2010

Transaction ID: H4.100664

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

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

 Mailing Address
PO Box 94510

 City State Zip Code
Palatine IL 60094-0000

 Purpose of Disbursement:
Office phones

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

165756.01

 Date MM / DD / YYYY
07 / 15 / 2010

Transaction ID: H4.100665

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.94		767.21		971.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
668.53		2514.94		3183.47

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) **DISBURSEMENT 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)
 Time Warner Cable

Mailing Address

PO Box 145

City	State	Zip Code
Kimberly	WI	54136-0145

Purpose of Disbursement:
 Internet

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166130.84

Date

M	M
0	7

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4.100666

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.71		296.12		374.83

B. Full Name (Last, First, Middle Initial)
 Shadow Fax

Mailing Address

4601 Helfesen Dr

City	State	Zip Code
Madison	WI	53718

Purpose of Disbursement:
 printer ink

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166701.60

Date

M	M
0	7

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4.100667

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.86		450.90		570.76

C. Full Name (Last, First, Middle Initial)
 Action Lock & Security Systems

Mailing Address

130 State Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement:
 Office keys

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166723.63

Date

M	M
0	7

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4.100707

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.63		17.40		22.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.20		764.42		967.62

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)
DISBURSEMENT 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)
City Treasurer - Water/Sewer

 Mailing Address
PO Box 2997

 City State Zip Code
Madison WI 53701

 Purpose of Disbursement:
Water bill

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167169.25

 Date M M / D D / Y Y Y Y
 07 / 30 / 2010

Transaction ID: H4.100708

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.58		352.04		445.62

B. Full Name (Last, First, Middle Initial)
Coca-Cola Bottling Company

 Mailing Address
PO Box 86

 City State Zip Code
Minneapolis MN 55486

 Purpose of Disbursement:
Office soda

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167190.35

 Date M M / D D / Y Y Y Y
 07 / 30 / 2010

Transaction ID: H4.100709

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.43		16.67		21.10

C. Full Name (Last, First, Middle Initial)
Doc Jams LLC

 Mailing Address
3818 Hoepker Rd

 City State Zip Code
Madison WI 53718

 Purpose of Disbursement:
Copier repair

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167301.13

 Date M M / D D / Y Y Y Y
 07 / 30 / 2010

Transaction ID: H4.100710

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.26		87.52		110.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.27		456.23		577.50

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)
DISBURSEMENT 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)
Impact Networking Inc.

 Mailing Address
PO Box 3090

 City State Zip Code
Milwaukee WA 53202

 Purpose of Disbursement:
Copier maintenance

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

167448.63

 Date MM / DD / YYYY
07 / 30 / 2010

Transaction ID: H4.100713

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.97		116.53		147.50

B. Full Name (Last, First, Middle Initial)
Office Depot

 Mailing Address
PO Box 9027

 City State Zip Code
Des Moines IA 50368

 Purpose of Disbursement:
Office supplies

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

168190.51

 Date MM / DD / YYYY
07 / 30 / 2010

Transaction ID: H4.100715

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.79		586.09		741.88

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

 Mailing Address
PO Box 94510

 City State Zip Code
Palatine IL 60094-0000

 Purpose of Disbursement:
Office phones

Category/Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

169161.67

 Date MM / DD / YYYY
07 / 30 / 2010

Transaction ID: H4.100717

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.94		767.22		971.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
390.70		1469.84		1860.54

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)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 95 / 95
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address

PO Box 25505

City State Zip Code
Lehigh Valley PA 18002

Purpose of Disbursement:
wireless internet

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

169293.41

Date M M / D D / Y Y Y Y
07 / 30 / 2010

Transaction ID: H4.100719

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 27.67		<input type="text"/> 104.07		<input type="text"/> 131.74

B. Full Name (Last, First, Middle Initial)
Charter Communications

Mailing Address

PO Box 3255

City State Zip Code
Milwaukee WI 53201-0000

Purpose of Disbursement:
cable tv

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

169434.15

Date M M / D D / Y Y Y Y
07 / 30 / 2010

Transaction ID: H4.100723

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 29.56		<input type="text"/> 111.18		<input type="text"/> 140.74

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 57.23		<input type="text"/> 215.25		<input type="text"/> 272.48

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/> 4407.02		<input type="text"/> 16578.83		<input type="text"/> 20985.85