

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

Office Use Only

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

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street) ▼

148 East Johnson Street

☐ Check if different than previously reported. (ACC)

Madison

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00074450

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

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

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
10 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
10 31 2015

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 Mike Jones

Signature of Treasurer

Mike Jones

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
11 20 2015

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)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
10		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2015</div>		<div>433731.94</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>269577.86</div>	
(c) Total Receipts (from Line 19) .....	<div>153601.47</div>	<div>1694826.05</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>423179.33</div>	<div>2128557.99</div>
7. Total Disbursements (from Line 31).....	<div>174549.26</div>	<div>1879927.92</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>248630.07</div>	<div>248630.07</div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	



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)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
10 01 2015

To:

M M / D D / Y Y Y Y Y  
10 31 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

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

## (a) Individuals/Persons Other

Than Political Committees

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

51650.25

311006.00

(ii) Unitemized .....

60474.00

849976.25

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

112124.25

1160982.25

(b) Political Party Committees .....

0.00

46450.00

(c) Other Political Committees

(such as PACs).....

3354.00

213222.26

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5) ..... ▶

115478.25

1420654.51

## 12. Transfers From Affiliated/Other

Party Committees.....

32600.00

69200.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

258.81

40107.42

## 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).....

5264.41

164864.12

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

0.00

0.00

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

5264.41

164864.12

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

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

153601.47

1694826.05

## 20. Total Federal Receipts

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

148337.06

1529961.93

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	8641.43	84822.52
(ii) Non-Federal Share.....	15362.52	150795.48
(b) Other Federal Operating Expenditures .....	95005.27	1055407.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	119009.22	1291025.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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	4480.00
(c) Other Political Committees (such as PACs).....	3000.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	3000.00	9480.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	52540.04	579422.26
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	52540.04	579422.26
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	174549.26	1879927.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	159186.74	1729132.44

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	115478.25	1420654.51
34. Total Contribution Refunds (from Line 28(d)) .....	3000.00	9480.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	112478.25	1411174.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	103646.70	1140230.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	258.81	40107.42
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	103387.89	1100122.76

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 110

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JAMES D. BELL**

Mailing Address 3900 W LEMONT BOULEVARD

City  
MEQUON

State Zip Code  
WI 53092-5226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROBERT W BAIRD AND COMPANY

Occupation  
INVESTMENT BANKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : SA11.987138**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. JAMES R. KIECKHEFER**

Mailing Address 569 ROSEDALE DRIVE

City  
THIENSVILLE

State Zip Code  
WI 53092-1357

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : SA11.987131**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. HO-CHUNK NATION**

Mailing Address PO BOX 640

City  
BLACK RIVER FALLS

State Zip Code  
WI 54615-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : SA11.990195**

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

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

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

4100.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. MR. HOWARD J. LUDWIGSON

Mailing Address 5537 BAYVIEW DRIVE

City

EAU CLAIRE

State

WI

Zip Code

54703-2184

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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : SA11.989681

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. FRED H. RAMER JR.

Mailing Address 3042 NORTH SHERI STREET

City

ORANGE

State

CA

Zip Code

92865-1623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : SA11.987181

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. PHILIP E. RITCH

Mailing Address 146 KALUAMOO STREET

City

KAILUA

State

HI

Zip Code

96734-2144

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 ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : SA11.989814

Amount of Each Receipt this Period

15.00

CONTRIBUTION

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

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

140.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. GLEN O'MALLEY**

Mailing Address 31046 CHEQUAMEGON DRIVE

City

HARTLAND

State

WI

Zip Code

53029-9780

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 05 / 2015

Transaction ID : SA11.987309

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. JAMES BEEBE**

Mailing Address 105 VERA LN N

City

WEST SALEM

State

WI

Zip Code

54669-9381

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 ▼

250.00

Date of Receipt

10 / 06 / 2015

Transaction ID : SA11.987248

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. FRANCIS BOCK**

Mailing Address 2735 S 44TH STREET

City

MILWAUKEE

State

WI

Zip Code

53219-3203

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 ▼

250.00

Date of Receipt

10 / 06 / 2015

Transaction ID : SA11.987235

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

250.00



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

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PEARL MARY GOETSCH**

Mailing Address 428 GROVE STREET

City  
SULLIVANState  
WIZip Code  
53178-9770FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2015			

Transaction ID : SA11.987300

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RICHARD HOLZWORTH**

Mailing Address 924 CHEROKEE ROAD

City  
CHARLOTTEState  
NCZip Code  
28207-2242FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2015			

Transaction ID : SA11.987394

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARGARET M. KRESSIN**

Mailing Address N114 W15965 RED OAK CIRCLE

City  
GERMANTOWNState  
WIZip Code  
53022-6013FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2015			

Transaction ID : SA11.987243

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

200.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. GENE E. MALLINGER**

Mailing Address 15245 CASEY CIRCLE

City State Zip Code  
 BROOKFIELD WI 53005-

FEC ID number of contributing federal political committee.

C

Name of Employer

METAL-ERA INC

Occupation

CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 06 2015

Transaction ID : SA11.989898

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JOHN MCCLELLAN**

Mailing Address W7803 STATE ROAD 11

City State Zip Code  
 DELAVAN WI 53115-2865

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 ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 06 2015

Transaction ID : SA11.987304

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. WALTER R. SCHWARTZ**

Mailing Address 8220 HARWOOD AVENUE # 338

City State Zip Code  
 WAUWATOSA WI 53213-2580

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 ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 06 2015

Transaction ID : SA11.987227

Amount of Each Receipt this Period

55.00

CONTRIBUTION

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

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

405.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 11 OF 110

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DONALD WENDORFF**

Mailing Address 5314 W TERRY AVEN

City

MILWAUKEE

State

WI

Zip Code

53223-

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 ▼

300.00

Date of Receipt

10 / 06 / 2015

Transaction ID : SA11.989825

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. THOMAS ROGERS**

Mailing Address W1194 COUNTY ROAD J

City

PRINCETON

State

WI

Zip Code

54968-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEENAH SPRINGS INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / 07 / 2015

Transaction ID : SA11.987986

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JACK W. BOETTCHER**

Mailing Address 13855 ELIZABETH COURT

City

NEW BERLIN

State

WI

Zip Code

53151-8021

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 ▼

450.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987463

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

2700.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. NANCY L. CARPENTER**

Mailing Address 7240 NORTH BEACH DRIVE

City State Zip Code  
MILWAUKEE WI 53217-3659

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OGDEN RESIDENTIAL, LLC

Occupation  
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987473

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. THOMAS J. CASSIDY**

Mailing Address 10200 WEST BLUEMOUND ROAD, APT 102

City State Zip Code  
MILWAUKEE WI 53226-4370

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 ▼

360.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987417

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. CLIFFORD CONRADT**

Mailing Address N5057 PULS ROAD

City State Zip Code  
SHIOCTON WI 54170-9058

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 ▼

300.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987423

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 110  
(check only one)

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CONSTANCE GRATZ**

Mailing Address 8210 W ALLERTON AVENUE

City

MILWAUKEE

State

WI

Zip Code

53220-3322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GROWING SYSTEMS, INC

Occupation

GENERAL MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : SA11.987517

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. CHARLES KRAUSE**

Mailing Address 1105 W CALUMET ROAD

City

MILWAUKEE

State

WI

Zip Code

53217-3011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KRAUSE CONSULTANTS, LLC

Occupation

CONSULTING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : SA11.987518

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ELEANOR D. LEE**

Mailing Address 1930 W RIVER BEND COURT

City

MEQUON

State

WI

Zip Code

53092-2925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : SA11.987516

Amount of Each Receipt this Period

300.00

CONTRIBUTION

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

1300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 110

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. KATHRYN A. MOSLING**

Mailing Address 1140 N EAGLE STREET APT 411

City State Zip Code  
OSHKOSH WI 54902-2668

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 ▼

435.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987461

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. TIMOTHY O'HARROW**

Mailing Address 6374 COMPANY LAKE ROAD

City State Zip Code  
OCONTO FALLS WI 54154-9327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

O'HARROW'S, INC

Occupation

DAIRY FARMING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987515

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. ARTHUR J. VLASAK**

Mailing Address 17405 BROOKLAWN DR.

City State Zip Code  
BROOKFIELD WI 53045-

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 ▼

400.00

Date of Receipt

10 / 08 / 2015

Transaction ID : SA11.987465

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

500.00

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

PAGE 15 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MRS. MARION J. ADLER**Mailing Address 10200 W BLUEMOUND ROAD  
APT 807

City	State	Zip Code
WAUWATOSA	WI	53226-4358

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 ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11.987548

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. JOSEPH W. DARCEY**

Mailing Address W3298 E GATE DRIVE

City	State	Zip Code
WATERTOWN	WI	53094-9727

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 M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11.987562

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. DAVID J. KLEINDL**

Mailing Address 1222 WEST CIRCLE DRIVE

City	State	Zip Code
BEAVER DAM	WI	53916-1208

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 ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11.987559

Amount of Each Receipt this Period

80.00

CONTRIBUTION

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

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

210.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. ETHEL LIESKE**

Mailing Address 534 SOUTH MARGARET STREET

City

MARKESAN

State

WI

Zip Code

53946-7140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

10 / 09 / 2015

Transaction ID : SA11.987573

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MR. THOMAS J. LUETZOW**

Mailing Address N7406 COUNTY RD E

City

WATERTOWN

State

WI

Zip Code

53094-9533

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 09 / 2015

Transaction ID : SA11.987552

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. ROBERT SPIVEY**

Mailing Address 1660 HOFFMAN ROAD

City

GREEN BAY

State

WI

Zip Code

54311-6299

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 ▼

400.00

Date of Receipt

10 / 09 / 2015

Transaction ID : SA11.989831

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

350.00



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

PAGE 17 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MR. EDWIN M. WALTERS**

Mailing Address N108 W15053 BEL AIRE LANE

City

GERMANTOWN

State

WI

Zip Code

53022-4203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11.987569

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. LEW E. WARTMAN**

Mailing Address N14 W30048 HIGH RIDGE ROAD

City

PEWAUKEE

State

WI

Zip Code

53072-4888

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11.987557

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. PEGGY J. WHITE**

Mailing Address N49 W15914 CAITLIN COURT

City

MENOMONEE FALLS

State

WI

Zip Code

53051-7543

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11.987556

Amount of Each Receipt this Period

75.00

CONTRIBUTION

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

275.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. HELEN A. BLESER**

Mailing Address 1804 30TH STREET

City

TWO RIVERS

State

WI

Zip Code

54241-2020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

405.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2015

Transaction ID : SA11.987676

Amount of Each Receipt this Period

100.25

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JAMES F. CONLEY**

Mailing Address 6310 E ROTAMER ROAD

City

MILTON

State

WI

Zip Code

53563-8657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MPI

Occupation

SECURITY GUARD

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2015

Transaction ID : SA11.987675

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. ROBERT J. JENSEN**

Mailing Address 5799 WOODLAND DRIVE

City

WAUNAKEE

State

WI

Zip Code

53597-9008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2015

Transaction ID : SA11.987640

Amount of Each Receipt this Period

105.00

CONTRIBUTION

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

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

255.25

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

PAGE 19 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JON S. MILLER**

Mailing Address 632 PRAIRIE HILLS DRIVE

City

DODGEVILLE

State

WI

Zip Code

53533-1674

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2015			

Transaction ID : SA11.987638

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. ERICH ZILLER**

Mailing Address 224 W TAPAWINGO ROAD

City

MISHICOT

State

WI

Zip Code

54228-9720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2015			

Transaction ID : SA11.987665

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JANET ALFONSO**

Mailing Address 6402 SHARPSBURG DRIVE

City

MADISON

State

WI

Zip Code

53718-3160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2015			

Transaction ID : SA11.987860

Amount of Each Receipt this Period

35.00

CONTRIBUTION

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

95.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ROGER J. BROWN**

Mailing Address 205 PROSPECT DRIVE

City

BROOKFIELD

State

WI

Zip Code

53005-4074

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 ▼

250.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987892

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. PETER HALVERSON**

Mailing Address 11931 W CLEOPHAS ROAD

City

BELOIT

State

WI

Zip Code

53511-8039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987886

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MS. ALICE A. HANSON**

Mailing Address 948 HANSON DRIVE

City

RIVER FALLS

State

WI

Zip Code

54022-1564

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 ▼

375.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987898

Amount of Each Receipt this Period

75.00

CONTRIBUTION

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

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

425.00

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

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

FOR LINE NUMBER: PAGE 21 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. JOHN B. KINKEAD

Mailing Address 693 MONTCALM PL

City

SAINT PAUL

State

MN

Zip Code

55116-1745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015

Transaction ID : SA11.987778

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. JOSEPH M. MANSUR

Mailing Address 6224 LYNN WAY

City

SAINT PAUL

State

MN

Zip Code

55129-8401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015

Transaction ID : SA11.987806

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. ROXANNE HILTON MARSTON III

Mailing Address 9213 CROSSWINDS LANE, APT 404

City

VERONA

State

WI

Zip Code

53593-7853

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015

Transaction ID : SA11.987843

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

750.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. EDWARD ORTON**

Mailing Address 2121 DICKINSON ROAD APT 9

City  
DE PERE

State  
WI

Zip Code  
54115-1647

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 ▼

315.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987817

Amount of Each Receipt this Period

70.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. WILLIAM POYA**

Mailing Address 16851 HARLEM AVENUE APT 236

City

TINLEY PARK

State

IL

Zip Code

60477-2736

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 ▼

210.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987795

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MARVIN J. SCHAEFFER**

Mailing Address 95 OAK CREEK TRAIL

City

MADISON

State

WI

Zip Code

53717-1509

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 ▼

210.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987802

Amount of Each Receipt this Period

25.00

CONTRIBUTION

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

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

120.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. GORDON L. SHEVELAND**

Mailing Address 455 4TH AVENUE

City

REDGRANITE

State

WI

Zip Code

54970-9707

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 ▼

225.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987908

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MS. CORA R. SHIFFER**

Mailing Address 3304 14TH STREET  
APT 212

City

EAU CLAIRE

State

WI

Zip Code

54703-2699

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 ▼

270.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987749

Amount of Each Receipt this Period

45.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR KENNETH SWEET**

Mailing Address 4045 S 54TH STREET

City

MILWAUKEE

State

WI

Zip Code

53220-2613

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 ▼

620.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987835

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

170.00

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WALTER G. WARTOLEC**

Mailing Address 927 CORNELL COURT

City  
MADISON

State Zip Code  
WI 53705-2241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987826

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBERT E. WESTERVELT**

Mailing Address 8644 BLACKWOLF DRIVE

City  
MADISON

State Zip Code  
WI 53717-2139

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 ▼

400.00

Date of Receipt

10 / 14 / 2015

Transaction ID : SA11.987836

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. WILLIAM O. BRACHMAN**

Mailing Address 10101 CEDAR CREEK ROAD

City  
CEDARBURG

State Zip Code  
WI 53012-9757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

10 / 16 / 2015

Transaction ID : SA11.989833

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

250.00



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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. RICHARD W. CHERWENKA**

Mailing Address 19650 PUTNEYS COURT

City State Zip Code  
BROOKFIELD WI 53045-2158

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2015

**Transaction ID : SA11.988278**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROGER J. KING**

Mailing Address W225 S10525 BIG BEND DRIVE

City State Zip Code  
BIG BEND WI 53103-9786

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2015

**Transaction ID : SA11.988250**

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JOHN M. MACK DR.**

Mailing Address 18685 ELM TERRACE DRIVE

City State Zip Code  
BROOKFIELD WI 53045-4912

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2015

**Transaction ID : SA11.988219**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

350.00

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MICHAEL W. MACK**

Mailing Address 514 SHERMAN AVENUE E

City

FORT ATKINSON

State

WI

Zip Code

53538-1959

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 ▼

300.00

Date of Receipt

10 / 16 / 2015

Transaction ID : SA11.988255

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. DALE A. NORDEEN**

Mailing Address 4206 YUMA DRIVE

City

MADISON

State

WI

Zip Code

53711-3058

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 ▼

600.00

Date of Receipt

10 / 16 / 2015

Transaction ID : SA11.988217

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. STEPHANIE SANDER**

Mailing Address 3948 N 96TH STREET

City

MILWAUKEE

State

WI

Zip Code

53222-2515

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

10 / 16 / 2015

Transaction ID : SA11.988211

Amount of Each Receipt this Period

25.00

CONTRIBUTION

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

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

175.00

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CARL H. SCHMUCK**

Mailing Address 4417 OAKWOOD HILLS PARKWAY

City

EAU CLAIRE

State

WI

Zip Code

54701-7794

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 ▼

225.00

Date of Receipt

10 / 16 / 2015

Transaction ID : SA11.988254

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JIM D. SCHNEIDER**

Mailing Address N24 W30382 CRYSTAL SPRINGS DRIVE

City

PEWAUKEE

State

WI

Zip Code

53072-4274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAKE COUNTRY MFG

Occupation

OWNER/PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

10 / 16 / 2015

Transaction ID : SA11.988239

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DOWE S. TILLEMA**

Mailing Address 606 17TTH STREET

City

MOSINEE

State

WI

Zip Code

54455-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FOOT LOCKER, INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

10 / 16 / 2015

Transaction ID : SA11.988238

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

375.00

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. DAVID W. LEWKE**

Mailing Address 1442 WHEELER ROAD  
UNIT B

City State Zip Code  
MADISON WI 53704-1466

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2015

Transaction ID : SA11.988345

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. COL JOHN F. ROGAN**

Mailing Address 6640 BOULDER LANE

City State Zip Code  
MIDDLETON WI 53562-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST  
EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFF

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2015

Transaction ID : SA11.988435

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. CHARLES B. ARRINGTON JR.**

Mailing Address 800 SAINT CHRISTOPHERS ROAD

City State Zip Code  
RICHMOND VA 23226-2711

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 ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SA11.988426

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

170.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 110  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOHN H. BARRETTE**

Mailing Address 930 25TH PLACE

City	State	Zip Code
WISCONSIN RAPIDS	WI	54494-3199

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 ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SA11.988343

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. BARBARA BUISKER**

Mailing Address 2875 MAPLE WOOD COURT

City	State	Zip Code
FITCHBURG	WI	53711-5184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ACCU WEB

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SA11.988529

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DAVID CHARLAND**

Mailing Address 1602 SKYLINE DR.

City	State	Zip Code
CEDARBURG	WI	53012-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CORVISA

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SA11.989781

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

375.00

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ROBERT COWEN**

Mailing Address 9617 N JUNIPER CIRCLE

City  
MEQUON

State Zip Code  
WI 53092-6215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BADGER ALLOYS, INC

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 20 2015

Transaction ID : SA11.988421

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. HERBERT ALAN LEVIN**

Mailing Address 724 E GRINNELL DRIVE

City  
BURBANK

State Zip Code  
CA 91501-1720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOJ OF CA

Occupation  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 20 2015

Transaction ID : SA11.989868

Amount of Each Receipt this Period

105.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DONALD L L. LJUNGREN**

Mailing Address 945 CENTURY AVE SE APT 214

City  
HUTCHINSON

State Zip Code  
MN 55350-3792

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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 20 2015

Transaction ID : SA11.989969

Amount of Each Receipt this Period

35.00

CONTRIBUTION

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

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

640.00

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOHN C. MCCRILLIS**

Mailing Address P.O. BOX 458

City  
NEWPORT

State Zip Code  
NH 03773-0458

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SA11.988361

Amount of Each Receipt this Period

95.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MARISA B. MINOTTE**

Mailing Address 4040 GLENWAY CT

City  
WAUWATOSA

State Zip Code  
WI 53222-

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SA11.989926

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. VERA NELSON**

Mailing Address 614 WILLIAMS STREET

City  
VIROQUA

State Zip Code  
WI 54665-1051

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 20 / 2015

Transaction ID : SA11.988356

Amount of Each Receipt this Period

35.00

CONTRIBUTION

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

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

230.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 110  
(check only one)

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RUSSELL PERKINSON**

Mailing Address P.O. BOX 65

City  
THAWVILLEState  
ILZip Code  
60968-0065FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFC

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SA11.988450

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GERALD SIMONSON**

Mailing Address 5813 JEFF PL

City  
MINNEAPOLISState  
MNZip Code  
55436-1937FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SA11.989971

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MICHAEL SPUDE**

Mailing Address E4741 ROLLING RIDGE ROAD

City  
SPRING GREENState  
WIZip Code  
53588-FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFC

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SA11.989914

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

450.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DAVID VAN DYKE**

Mailing Address S5385 HANSON LANE

City  
VIROQUA

State Zip Code  
WI 54665-8061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MENTAL HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

10 / 20 / 2015

Transaction ID : SA11.988439

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. SUMIE Y. WARD**

Mailing Address P.O. BOX 78

City  
PENRYN

State Zip Code  
CA 95663-0078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

10 / 20 / 2015

Transaction ID : SA11.988329

Amount of Each Receipt this Period

450.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARTHA WHITE**

Mailing Address W8828 JASON DRIVE

City  
BEAVER DAM

State Zip Code  
WI 53916-9787

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

10 / 20 / 2015

Transaction ID : SA11.988499

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

1050.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WILLIAM C. CURRY JR.**

Mailing Address 2113 MONROE STREET

City

NEW HOLSTEIN

State

WI

Zip Code

53061-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

C.J. MEISELWITZ FURNITURE

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : SA11.988547**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. CARL W. KUEHNE**

Mailing Address 4479 HERITAGE HEIGHTS

City

DE PERE

State

WI

Zip Code

54115-9254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN FOOD GROUPS

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : SA11.988535**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DAVID MARSHBURN**

Mailing Address 905 WOODLAWN DR.

City

WILLIAMSTON

State

NC

Zip Code

27892-

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 Y Y  
10 / 21 / 2015

**Transaction ID : SA11.989997**

Amount of Each Receipt this Period

275.00

CONTRIBUTION

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

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

5775.00

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

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

FOR LINE NUMBER: PAGE 35 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DAVID SCHLAPMAN**

Mailing Address 15565 POMONA RD

City State Zip Code  
BROOKFIELD WI 53005-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORRER BUSINESS INTERIORS

Occupation  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2015

Transaction ID : SA11.990094

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JEANETTE FELLOWS**

Mailing Address 17 N 1ST ST

City State Zip Code  
EVANSVILLE WI 53536-1106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETRD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : SA11.990033

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. GLADYS R R. HUBER**

Mailing Address 707 WEST PIONEER RD

City State Zip Code  
MEQUON WI 53097-1732

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : SA11.990005

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

450.00

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

PAGE 36 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. LILLIAN I KRUEGER**

Mailing Address 6756 N 72ND AVE

City  
WAUSAUState  
WIZip Code  
54401-8804FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

Transaction ID : SA11.990012

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JEFFREY C. PLIER**

Mailing Address 14 N HILL ROAD

City  
WAUSAUState  
WIZip Code  
54403-3671FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAUSAU CONTAINER CORPORATION

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

Transaction ID : SA11.988589

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DOROTHY L. TAYLOR**

Mailing Address 7587 BALTIC DR.

City  
VERONAState  
WIZip Code  
53593-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 ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

Transaction ID : SA11.990028

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 110  
(check only one)

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MR. KEN TOKARZ**

Mailing Address 535 STURGEON EDDY RD

City  
WAUSAUState  
WIZip Code  
54403-6754FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			22			2015					

Transaction ID : SA11.990021

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. ARTHUR J. VLASAK**

Mailing Address 17405 BROOKLAWN DR.

City

BROOKFIELD

State

WI

Zip Code

53045-

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 ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			22			2015					

Transaction ID : SA11.990015

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JEANNE S. BARNES**Mailing Address 165 CHRISTOPHER STREET  
APT 6 C C

City

NEW YORK

State

NY

Zip Code

10014-2803

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 ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			23			2015					

Transaction ID : SA11.988593

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

400.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DAVID DARWIN**

Mailing Address 512 S FRANKLIN ST

City  
WHITEWATERState Zip Code  
WI 53538-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 ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11.990067

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBERT LHUHN**

Mailing Address W156 N5382 BETTE DR.

City  
MENOMONEE FALLSState Zip Code  
WI 53051-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 ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11.990052

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. CAROLYN LORANG**

Mailing Address 435 KELVINGTON DRIVE

City  
SUN PRAIRIEState Zip Code  
WI 53590-4247FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11.988601

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

325.00

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

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

 FOR LINE NUMBER:  
 (check only one)

PAGE 39 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. FRED H. RAMER JR.**

Mailing Address 3042 NORTH SHERI STREET

 City  
 ORANGE

 State  
 CA

 Zip Code  
 92865-1623

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : SA11.988583

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MARK SCHROEDER**

Mailing Address 513 WASHINGTON STREET

 City  
 ATHENS

 State  
 WI

 Zip Code  
 54411-9757

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

SCHOOL DISTRICT OF ATHENS

Occupation

MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : SA11.988615

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. KAREN ZIMMERMAN**

Mailing Address 411 21ST STREET N

 City  
 MENOMONIE

 State  
 WI

 Zip Code  
 54751-2231

 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 ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : SA11.988627

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

260.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JAMES BEEBE**

Mailing Address 105 VERA LN N

City  
WEST SALEM

State Zip Code  
WI 54669-9381

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : SA11.988686**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MS. MEREDITH BERG**

Mailing Address 914 SALLY'S ALLEY N

City  
HUDSON

State Zip Code  
WI 54016-1176

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : SA11.988679**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ALBERT STARSHAK**

Mailing Address 4852 WOODRIDGE COURT

City  
MINNETONKA

State Zip Code  
MN 55345-3935

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : SA11.988688**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

300.00



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

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

FOR LINE NUMBER: PAGE 41 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ZEVI AH A. ZUBE**
 Mailing Address 119 CEDAR RIDGE DRIVE APT S 301  
 APT S 301

 City State Zip Code  
 WEST BEND WI 53095-3667

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015

Transaction ID : SA11.988716

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GEORGE BORCHARDT SR.**

Mailing Address N9747 BRANDY CREEK ROAD

 City State Zip Code  
 CLINTONVILLE WI 54929-8863

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 ▼

210.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

Transaction ID : SA11.988819

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MRS. LUCILLE E. CADWELL**

Mailing Address 3000 W BELMONT ROAD

 City State Zip Code  
 WAUSAU WI 54401-8313

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 ▼

245.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

Transaction ID : SA11.989725

Amount of Each Receipt this Period

40.00

CONTRIBUTION

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

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 110  
(check only one)

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MRS. GERALDINE CHRISTOPH**

Mailing Address 124 OLDE ALLOUEZ COURT

City  
GREEN BAYState Zip Code  
WI 54301-1971FEC 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 M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11.988825

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MRS. GERALDINE CHRISTOPH**

Mailing Address 124 OLDE ALLOUEZ COURT

City  
GREEN BAYState Zip Code  
WI 54301-1971FEC 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 M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11.988826

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. WALTER H. CLAIBORNE III**

Mailing Address 14217 CLAIBORNE ROAD

City  
BATCHELORState Zip Code  
LA 70715-3514FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11.988760

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 43 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MARTHA P. GIESE**

Mailing Address 20 FRAMINGHAM LANE

City

PITTSFORD

State

NY

Zip Code

14534-1048

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : SA11.988725

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. PEARL MARY GOETSCH**

Mailing Address 428 GROVE STREET

City

SULLIVAN

State

WI

Zip Code

53178-9770

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : SA11.988770

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. GARY GORALSKI**

Mailing Address 2929 S 69TH STREET

City

MILWAUKEE

State

WI

Zip Code

53219-2916

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFORTS

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : SA11.988769

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

250.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 110

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

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RICHARD C. MARX**

Mailing Address P.O. BOX 440

City

WAPPINGERS FALLS

State

NY

Zip Code

12590-0440

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11.988737

Amount of Each Receipt this Period

105.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JOSEPH MAYBERRY**

Mailing Address P.O. BOX 160

City

FITZGERALD

State

GA

Zip Code

31750-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RR STREET &amp; CO INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11.989904

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. HUGH E. MORGAN**

Mailing Address 110 N 89TH STREET

City

WAUWATOSA

State

WI

Zip Code

53226-4502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROBERTSON RYAN

Occupation

SALES

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11.988809

Amount of Each Receipt this Period

25.00

CONTRIBUTION

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

380.00

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 PageFOR LINE NUMBER: PAGE 45 OF 110  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JAMES SCHEUERELL**

Mailing Address 9040 FAIRVIEW AVE

City	State	Zip Code
SOUTH MILWAUKEE	WI	53172-

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 ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2015

Transaction ID : SA11.989843

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. DANIEL R. SMITH**

Mailing Address 240 SEMINOLE LANE

City	State	Zip Code
GREEN BAY	WI	54313-4950

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 ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2015

Transaction ID : SA11.989724

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. HAROLD SMITH**

Mailing Address 200 W MADISON STREET

City	State	Zip Code
CHICAGO	IL	60606-

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 ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2015

Transaction ID : SA11.989780

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

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

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

10350.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WAYNE A. TOENJES**

Mailing Address 1104 FLINTS ROAD

City  
WAUSAU

State  
WI

Zip Code  
54401-9049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAJOR INDUSTRIES

Occupation

MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 27 / 2015

Transaction ID : SA11.988741

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. BERNARD VAN DINTER**

Mailing Address 8081 FIELDING LANE

City

GREENDALE

State

WI

Zip Code

53129-2115

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 ▼

1200.00

Date of Receipt

10 / 27 / 2015

Transaction ID : SA11.988795

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. ERICH ZILLER**

Mailing Address 224 W TAPAWINGO ROAD

City

MISHICOT

State

WI

Zip Code

54228-9720

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 ▼

290.00

Date of Receipt

10 / 27 / 2015

Transaction ID : SA11.988845

Amount of Each Receipt this Period

25.00

CONTRIBUTION

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

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

275.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. FOREST COUNTY POTAWATOMI COMMU**

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

10 / 28 / 2015

Transaction ID : SA11.990189

Amount of Each Receipt this Period

3500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MR. RON RETZKE**

Mailing Address 1910 NORHARDT DRIVE, #305  
APT 305

City

BROOKFIELD

State

WI

Zip Code

53045-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 29 / 2015

Transaction ID : SA11.989785

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. PAUL ZANOWSKI**

Mailing Address 612 MALCOLM PLACE

City

ALEXANDRIA

State

VA

Zip Code

22302-3718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US GOVERNMENT

Occupation

CONGRESSIONAL AFFAIRS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 29 / 2015

Transaction ID : SA11.988865

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 48 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MICHAEL DARROW**

Mailing Address 7960 N RIVER ROAD

City State Zip Code  
 RIVER HILLS WI 53217-

FEC ID number of contributing federal political committee.

C

Name of Employer

RUSS DARROW GROUP

Occupation

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 30 2015

Transaction ID : SA11.989063

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JAMES DORMAN**

Mailing Address 10600 W MITCHELL STREET

City State Zip Code  
 WEST ALLIS WI 53214-

FEC ID number of contributing federal political committee.

C

Name of Employer

AMALGA COMPOSITES INC

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 Y  
 10 30 2015

Transaction ID : SA11.989915

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JOAN S. HUGHES**

Mailing Address N57 W38248 LAKELAND DRIVE

City State Zip Code  
 OCONOMOWOC WI 53066-

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 30 2015

Transaction ID : SA11.988966

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

800.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 110

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. MARK IRGENS**

Mailing Address 648 PLUNKINGTON AVENUE  
STE 200

City State Zip Code  
MILWAUKEE WI 53203-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IRGENS PARTNERS LLC

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 Y  
10 / 30 / 2015

**Transaction ID : SA11.988948**

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. KEVIN KRAEMER**

Mailing Address 720 WESTBROOK DRIVE

City State Zip Code  
PLAIN WI 53577-9787

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KRAEMER BROTHERS

Occupation  
EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : SA11.988993**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MRS. MARYLYN MENZEL**

Mailing Address W7506 STATE ROAD 106

City State Zip Code  
FORT ATKINSON WI 53538-9537

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : SA11.989721**

Amount of Each Receipt this Period

40.00

CONTRIBUTION

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

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

10290.00

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

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

FOR LINE NUMBER: PAGE 50 OF 110  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MARGARET M. RENDALL**

Mailing Address 6710 BRAUN ROAD

City

MOUNT PLEASANT

State

WI

Zip Code

53403-9414

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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : SA11.989010**

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. PHILIP E. RITCH**

Mailing Address 146 KALUAMOO STREET

City

KAILUA

State

HI

Zip Code

96734-2144

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : SA11.989874**

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

110.00

51650.25

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 51 OF 110

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

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. JOHNSON & JOHNSON FEDERAL PAC**

Mailing Address 1 JOHNSON & JOHNSON PLAZA

City State Zip Code  
 NEW BRUNSWICK NJ 08933-0001

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 07 2015

**Transaction ID : SA11.990194**

Amount of Each Receipt this Period

1250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. DUFFY FOR CONGRESS**

Mailing Address P.O. BOX 538

City State Zip Code  
 WAUSAU WI 54402-0538

FEC ID number of contributing federal political committee. **C** C00464339

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

104.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 21 2015

**Transaction ID : SA11.990193**

Amount of Each Receipt this Period

104.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MYLAN INC PAC**

Mailing Address 700 6TH STREET NW  
 STE 525

City State Zip Code  
 WASHINGTON DC 20001-3980

FEC ID number of contributing federal political committee. **C** C00332395

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 Y Y  
 10 28 2015

**Transaction ID : SA11.990190**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

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

3354.00

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

3354.00

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

FOR LINE NUMBER: PAGE 52 OF 110

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1885FEC ID number of contributing  
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2015			

Transaction ID : SA11.990196

Amount of Each Receipt this Period

32600.00

TRANSFER

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

32600.00

32600.00

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

PAGE 53 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WI DEPARTMENT OF REVENUE**

Mailing Address PO BOX 8903

City  
MADISONState  
WIZip Code  
53708-8903FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2015			

Transaction ID : SA11.990191

Amount of Each Receipt this Period

62.35

REFUND

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

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

62.35

62.35

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

PAGE 54 OF 110

☒ 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

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address P.O. BOX 3052

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2015

Transaction ID : SB21B.I22589

Amount of Each Disbursement this Period

6143.71

Full Name (Last, First, Middle Initial)

**B. BEST BUY**

Mailing Address 7357 WEST TOWNE WAY

City MADISON      State WI      Zip Code 53719

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB21B.I22695

Amount of Each Disbursement this Period

63.28

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DOMAIN/HOSTING SERVICES**Mailing Address 14455 N HAYDEN ROAD  
SUITE 219

City SCOTTSDALE      State AZ      Zip Code 85260

Purpose of Disbursement  
DOMAIN REGISTRATION

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB21B.I22694

Amount of Each Disbursement this Period

79.99

[MEMO ITEM]

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

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

6143.71

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

PAGE 55 OF 110

☒ 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

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK      State CA      Zip Code 94025

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB21B.I22690

Amount of Each Disbursement this Period

500.21

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK      State CA      Zip Code 94025

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB21B.I22693

Amount of Each Disbursement this Period

750.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK      State CA      Zip Code 94025

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB21B.I22697

Amount of Each Disbursement this Period

750.10

[MEMO ITEM]

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

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

0.00

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

PAGE 56 OF 110

☒ 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

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK      State CA      Zip Code 94025

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB21B.I22699

Amount of Each Disbursement this Period

95.11

[MEMO ITEM]

**B. FACEBOOK**

Full Name (Last, First, Middle Initial)

Mailing Address 1 HACKER WAY

City MENLO PARK      State CA      Zip Code 94025

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 07 / 2015

Transaction ID : SB21B.I22704

Amount of Each Disbursement this Period

750.26

[MEMO ITEM]

**C. GODADDY.COM**

Full Name (Last, First, Middle Initial)

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE      State AZ      Zip Code 85260

Purpose of Disbursement  
WEBSITE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2015

Transaction ID : SB21B.I22691

Amount of Each Disbursement this Period

6.99

[MEMO ITEM]

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

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

0.00



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

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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

Full Name (Last, First, Middle Initial)

**A. GODADDY.COM**

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE      State AZ      Zip Code 85260

Purpose of Disbursement  
WEBSITE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB21B.I22700

Amount of Each Disbursement this Period

8.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GODADDY.COM**

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE      State AZ      Zip Code 85260

Purpose of Disbursement  
WEBSITE DEVELOPMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 06 / 2015

Transaction ID : SB21B.I22703

Amount of Each Disbursement this Period

209.97

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SAFESoft SOLUTIONS**

Mailing Address 20950 WARNER CENTER LANE

City WOODLAND      State CA      Zip Code 91367

Purpose of Disbursement  
PREDICTIVE DIALER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2015

Transaction ID : SB21B.I22702

Amount of Each Disbursement this Period

2030.00

[MEMO ITEM]

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

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

0.00

<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

Republican Party of Wisconsin

### A. TWITTER ADVERTISING

Category/  
Type

62.52

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

## B. TWITTER ADVERTISING

Category/  
Type

18.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

### C. TWITTER ADVERTISING

Category/  
Type

36.00

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify) ▼	
	<input type="checkbox"/> President			
State:	District:			

0.00

\_\_\_\_\_

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

PAGE 59 OF 110

☒ 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

Full Name (Last, First, Middle Initial)

**A. VERTICAL RESPONSE**

Mailing Address 50 BEALE STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
WEBSITE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 08 2015

Transaction ID : SB21B.I22705

Amount of Each Disbursement this Period

749.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. VERTICAL RESPONSE**

Mailing Address 50 BEALE STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
WEBSITE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 08 2015

Transaction ID : SB21B.I22706

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 01 2015

Transaction ID : SB21B.I22590

Amount of Each Disbursement this Period

3.40

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

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

3.40

<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

Republican Party of Wisconsin

**A. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement

Transaction ID : SB21B.I22616

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

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

7657.75

Full Name (Last, First, Middle Initial)

## B. AMERICA RISING, LLC

Mailing Address 1555 WILSON BOULEVARD

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
ARLINGTON	VA	22209

Transaction ID : SB21B.I22628

## Purpose of Disbursement

### RESEARCH SERVICES

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

3000.00

State:  District:

Full Name (Last, First, Middle Initial)  
C. AMERICAN LIBERTY GROUP

Date of Disbursement



Mailing Address 611 PENNSYLVANIA AVENUE SE

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB21B.I22620

Purpose of Disbursement  
FUNDRAISING - NOT FEA


Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

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

7202.40

State:  District:

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

17860.15

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

[illegible]

**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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☒ 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

Full Name (Last, First, Middle Initial)

**A. MAJORITY STRATEGIES**

Mailing Address 12854 KENAN DRIVE

City JACKSONVILLE      State FL      Zip Code 32258

Purpose of Disbursement  
DIGITAL DESIGN

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : SB21B.I22615

Amount of Each Disbursement this Period

2025.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : SB21B.I22591

Amount of Each Disbursement this Period

5.80

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2015

Transaction ID : SB21B.I22592

Amount of Each Disbursement this Period

0.40

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

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

2031.20

**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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☒ 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

Full Name (Last, First, Middle Initial)

**A. ISTREAM**

Mailing Address 13555 BISHOPS CT, STE 102

City BROOKFIELD      State WI      Zip Code 53005

Purpose of Disbursement  
CHECK PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : SB21B.I22588

Amount of Each Disbursement this Period

201.15

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 07 / 2015

Transaction ID : SB21B.I22593

Amount of Each Disbursement this Period

101.40

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 981540

City EL PASO      State TX      Zip Code 79998

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2015

Transaction ID : SB21B.I22595

Amount of Each Disbursement this Period

7.95

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

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

310.50

**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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☒ 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

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 08 2015

Transaction ID : SB21B.I22594

Amount of Each Disbursement this Period

1.60

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 09 2015

Transaction ID : SB21B.I22596

Amount of Each Disbursement this Period

18.60

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 12 2015

Transaction ID : SB21B.I22597

Amount of Each Disbursement this Period

3.40

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

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

23.60

<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

Republican Party of Wisconsin

### A. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City	State	Zip Code
EL PASO	TX	79998

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Diagram showing three different connector types: M 10, D 13, and Y 2015.

Transaction ID : SB21B.I22599

Amount of Each Disbursement this Period

10.57

Full Name (Last, First, Middle Initial)

## B. BANCARD/FIS MERCHANT SERVICES

Mailing Address 11000 W LAKE PARK DRIVE

City	State	Zip Code
MILWAUKEE	WI	53224

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.I22600

Amount of Each Disbursement this Period

283.48

Full Name (Last, First, Middle Initial)

### C. PIRYX

Mailing Address 85 NATOMA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement  
CREDIT CARD PROCESSING 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) ▼		

Date of Disbursement

Three digital displays showing the date 10/13/2015 in MM/DD/YYYY format. The first display shows '10' for the month, the second shows '13' for the day, and the third shows '2015' for the year. Each display has a top row of small indicators (M, D, Y) and a bottom row of small indicators.

Transaction ID : SB21B.I22598

Amount of Each Disbursement this Period

4.00

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

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

298.05



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(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

Full Name (Last, First, Middle Initial)

**A. PUSH DIGITAL**

Mailing Address P.O. BOX 7431

City COLUMBIA    State SC    Zip Code 29202

Purpose of Disbursement  
WEBSITE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : SB21B.I22635

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

**B. VILLAGE GRAPHICS PRINTING, LLC**

Mailing Address 108 W CAPITOL DRIVE

City HARTLAND    State WI    Zip Code 53029

Purpose of Disbursement  
PRINTING - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : SB21B.I22626

Amount of Each Disbursement this Period

635.86

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE    State WI    Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2015

Transaction ID : SB21B.I22586

Amount of Each Disbursement this Period

158.34

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

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

2544.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(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

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2015

Transaction ID : SB21B.I22587

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2015

Transaction ID : SB21B.I22601

Amount of Each Disbursement this Period

7.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : SB21B.I22602

Amount of Each Disbursement this Period

3.00

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

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

22.00

<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

Republican Party of Wisconsin

**A. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 N. FAYETTE ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
POLLING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

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

Date of Disbursement

Transaction ID : SB21B.I22625

Amount of Each Disbursement this Period

18000.00

Full Name (Last, First, Middle Initial)

## B. PIRYX

Mailing Address 85 NATOMA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement	CREDIT CARD PROCESSING 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) ▼		

Date of Disbursement

Transaction ID : SB21B.I22603

Amount of Each Disbursement this Period



Full Name (Last, First, Middle Initial)

### C. AMERICA RISING, LLC

Mailing Address 1555 WILSON BOULEVARD

City	State	Zip Code
ARLINGTON	VA	22209

## Purpose of Disbursement RESEARCH SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.I22629

Amount of Each Disbursement this Period

3000.00

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

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

21002.00

<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

Republican Party of Wisconsin

## A. ARENA COMMUNICATIONS

Date of Disbursement

Transaction ID : SB21B.I22621

Amount of Each Disbursement this Period

738.00

Disbursement For:

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

State:  District:

Date of Disbursement

## B. PIRYX

Three digital displays showing the date 10/19/2015 in MM/DD/YYYY format. The first display shows '10' for the month, the second shows '19' for the day, and the third shows '2015' for the year. Each display has a small 'M' or 'D' or 'Y' indicator above the digits.

Transaction ID : SB21B.I22604

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	3.40

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Date of Disbursement

### C. TOKEN STORAGE

Transaction ID : SB21B.I22633


Amount of Each Disbursement this Period

570.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

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

1311.40

**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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☒ 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

Full Name (Last, First, Middle Initial)

**A. WEST BEND MUTUAL**

Mailing Address 1900 S 18TH AVENUE

City WEST BEND      State WI      Zip Code 53095

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      19      2015

Transaction ID : SB21B.I22623

Amount of Each Disbursement this Period

2363.00

Full Name (Last, First, Middle Initial)

**B. WISC DEPT OF REVENUE - SLS TX**

Mailing Address P.O. BOX 930208

City MILWAUKEE      State WI      Zip Code 53293

Purpose of Disbursement  
SALES/USE TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      19      2015

Transaction ID : SB21B.I22632

Amount of Each Disbursement this Period

545.86

Full Name (Last, First, Middle Initial)

**C. AMERICAN LIBERTY GROUP**

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON      State DC      Zip Code 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      20      2015

Transaction ID : SB21B.I22622

Amount of Each Disbursement this Period

1120.00

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

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

4028.86

**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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☒ 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

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 20 2015

Transaction ID : SB21B.I22605

Amount of Each Disbursement this Period

111.80

Full Name (Last, First, Middle Initial)

**B. CLOCKWORK SYSTEMS**

Mailing Address 6001 GLOSTER ROAD

City State Zip Code  
BETHESDA MD 20816
Purpose of Disbursement  
DATA SOLUTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 21 2015

Transaction ID : SB21B.I22614

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 21 2015

Transaction ID : SB21B.I22606

Amount of Each Disbursement this Period

47.40

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

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

609.20

<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

Republican Party of Wisconsin

**A. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement

The image shows three 10-pin D-sub connectors. The first connector is labeled 'M10' and has two pins labeled 'M'. The second connector is labeled 'D21' and has two pins labeled 'D'. The third connector is labeled 'Y2015' and has four pins labeled 'Y'.

Transaction ID : SB21B.I22617

Category/  
Type

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

State:  District:

Amount of Each Disbursement this Period

11370.35

### B. STEVE BROWN DM

Date of Disbursement

Three digital displays showing the date 10/21/2015 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '21' with 'D' indicators above it. The third display shows '2015' with 'Y' indicators above it.

Transaction ID : SB21B.I22618

Category/  
Type

Disbursement For:

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

State:  District:

Amount of Each Disbursement this Period

5003.40

**C. WILAND DIRECT INC.**

Date of Disbursement

Transaction ID : SB21B.I22624

Category/  
Type

Disbursement For:

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

State:  District:

Amount of Each Disbursement this Period

800.00

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

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

17173.75

<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

Republican Party of Wisconsin

### A. PIRYX

Three 10-pin D-sub connectors are shown. The first connector is labeled '10' and has two pins labeled 'M'. The second connector is labeled '22' and has two pins labeled 'D'. The third connector is labeled '2015' and has four pins labeled 'Y'.

Category/  
Type

100.40

State:  District:

**B. HEINZEN PRINTING INC.**

Candidate Name

Category/  
Type

685.75

State:  District:

### C. PIRYX

Candidate Name

Category/  
Type

64.40

State:  District:

850.55



<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

Republican Party of Wisconsin

### A. PIRYX

M / D / Y

10 23 2015

Category/  
Type

4.10

State:  District:

## B. PIRYX

Three digital displays showing the date 10/26/2015 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '26' with 'D' indicators above it. The third display shows '2015' with 'Y' indicators above it.

Category/  
Type

3.20

State:  District:

### C. PIRYX

Category/  
Type

5.80

State:  District:

13.10

<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

Republican Party of Wisconsin

### A. PIRYX

Category/  
Type

8.00

State:  District:

**B. SCM ASSOCIATES, INC.**

Category/  
Type

20737.00

State:  District:

### C. PIRYX

Category/  
Type

4.60

State:  District:

20749.60

94975.27

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

PAGE 75 OF 110

<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

Full Name (Last, First, Middle Initial)

**A. CHARTER COMMUNICATIONS, INC WI PAC**

Mailing Address 400 ATLANTIC STREET

City	State	Zip Code
STAMFORD	CT	06901

Purpose of Disbursement  
RETURNED CONTRIBUTION

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : SB21B.I22630

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER MOVING FORWARD FUND**

Mailing Address 200 OCEANGATE SUITE 100

City	State	Zip Code
LONG BEACH	CA	90802

Purpose of Disbursement  
RETURNED CONTRIBUTION

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : SB21B.I22631

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

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) ▼	

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

3000.00
---------

3000.00
---------

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

Republican Party of Wisconsin

**A. ACCOUNTANTS WORLD PAYROLL LLC**

The image shows three 10-pin D-sub connectors. The first connector is labeled 'M10' and has two pins labeled 'M'. The second connector is labeled 'D01' and has two pins labeled 'D'. The third connector is labeled 'Y2015' and has four pins labeled 'Y'.

Category/  
Type

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	45%

State:  District:

## B. ASSURANT EMPLOYEE BENEFITS

Category/  
Type

408.22

State:  District:

## C. EMPLOYEE BENEFITS CORPORATION

Category/  
Type

1048.84

State:  District:

1457.10

\_\_\_\_\_

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

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Transaction ID : SB30B.I22670

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

486.38

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Full Name (Last, First, Middle Initial)

**B. RICHARD DICKIE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address 126 N. BLAIR ST. #1

City	State	Zip Code
MADISON	WI	53703

Transaction ID : SB30B.I22636

Purpose of Disbursement  
PAYROLL

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1201.79

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Full Name (Last, First, Middle Initial)

**C. MICHAEL DUFFEY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address 726 WINDSOR COURT

City	State	Zip Code
WAUWATOSA	WI	53226

Transaction ID : SB30B.I22638

Purpose of Disbursement  
PAYROLL

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

3161.26

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

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

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

4849.43

**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

Full Name (Last, First, Middle Initial)

**A. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22642

Amount of Each Disbursement this Period

559.85
--------

Full Name (Last, First, Middle Initial)

**B. PATRICK GEHL**

Mailing Address 1179 COLUMBUS CIRCLE

City JANESVILLE	State WI	Zip Code 53545
--------------------	-------------	-------------------

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22644

Amount of Each Disbursement this Period

944.70
--------

Full Name (Last, First, Middle Initial)

**C. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City SUAMICO	State WI	Zip Code 54313
-----------------	-------------	-------------------

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22646

Amount of Each Disbursement this Period

1535.24
---------

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

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

3039.79
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**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 79 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BENJAMIN HEATH**

Mailing Address 514 E WASHINGTON AVENUE

City	State	Zip Code
MADISON	WI	53703

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22648

Amount of Each Disbursement this Period

1263.64
---------

Full Name (Last, First, Middle Initial)

**B. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City	State	Zip Code
MIDDLETON	WI	53562

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22650

Amount of Each Disbursement this Period

733.72
--------

Full Name (Last, First, Middle Initial)

**C. ANNA LEONE**

Mailing Address 801 W JOHNSON STREET

City	State	Zip Code
MADISON	WI	53706

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22652

Amount of Each Disbursement this Period

206.71
--------

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

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

2204.07
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**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

Full Name (Last, First, Middle Initial)

**A. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City  
BELOITState  
WIZip Code  
53511Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22654

Amount of Each Disbursement this Period

469.66
--------

Full Name (Last, First, Middle Initial)

**B. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22656

Amount of Each Disbursement this Period

273.31
--------

Full Name (Last, First, Middle Initial)

**C. JASON RECTOR**

Mailing Address 1902 40TH AVENUE

City  
OSCEOLAState  
WIZip Code  
54020Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22658

Amount of Each Disbursement this Period

1236.69
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

1979.66
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**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 81 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City MAYLENE	State AL	Zip Code 35114
-----------------	-------------	-------------------

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22660

Amount of Each Disbursement this Period

1608.52
---------

Full Name (Last, First, Middle Initial)

**B. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City MIDDLETON	State WI	Zip Code 53562
-------------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22663

Amount of Each Disbursement this Period

157.23
--------

Full Name (Last, First, Middle Initial)

**C. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON	State WI	Zip Code 53703
-----------------	-------------	-------------------

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22665

Amount of Each Disbursement this Period

425.50
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SUBTOTAL of Disbursements This Page (optional).....▶

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

2191.25
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**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

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22671

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

5595.21

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22672

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

29.04

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22673

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

10.83

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

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

State: District:

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

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

5635.08

**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 83 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22674

Amount of Each Disbursement this Period

58.36
-------

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2015

Transaction ID : SB30B.I22675

Amount of Each Disbursement this Period

79.00
-------

Full Name (Last, First, Middle Initial)

**C. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address BOX 6164

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

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2015

Transaction ID : SB30B.I22676

Amount of Each Disbursement this Period

482.84
--------

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

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

620.20
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**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 84 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. EMPLOYEE BENEFITS CORPORATION**

Mailing Address P.O. BOX 44347

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

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2015

Transaction ID : SB30B.I22677

Amount of Each Disbursement this Period

110.60
--------

Full Name (Last, First, Middle Initial)

**B. DEAN CARE**

Mailing Address P.O. BOX 673111

City  
CHICAGOState  
ILZip Code  
60695Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : SB30B.I22678

Amount of Each Disbursement this Period

4759.51
---------

Full Name (Last, First, Middle Initial)

**C. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22637

Amount of Each Disbursement this Period

1219.23
---------

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

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

6089.34
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**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 85 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City	State	Zip Code
WAUWATOSA	WI	53226

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22639

Amount of Each Disbursement this Period

3161.25
---------

Full Name (Last, First, Middle Initial)

**B. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City	State	Zip Code
WAUWATOSA	WI	53226

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22640

Amount of Each Disbursement this Period

417.00
--------

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement  
MILEAGE EXPENSE

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22686

Amount of Each Disbursement this Period

225.72
--------

[MEMO ITEM]

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

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

3578.25
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**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 86 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City	State	Zip Code
FRANKLIN	WI	53132

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22641

Amount of Each Disbursement this Period

2581.22
---------

Full Name (Last, First, Middle Initial)

**B. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City	State	Zip Code
MADISON	WI	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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22643

Amount of Each Disbursement this Period

795.85
--------

Full Name (Last, First, Middle Initial)

**C. PATRICK GEHL**

Mailing Address 1179 COLUMBUS CIRCLE

City	State	Zip Code
JANESVILLE	WI	53545

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22645

Amount of Each Disbursement this Period

944.69
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SUBTOTAL of Disbursements This Page (optional).....▶

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

4321.76
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**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 87 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City	State	Zip Code
SUAMICO	WI	54313

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22647

Amount of Each Disbursement this Period

1535.25
---------

Full Name (Last, First, Middle Initial)

**B. BENJAMIN HEATH**

Mailing Address 514 E WASHINGTON AVENUE

City	State	Zip Code
MADISON	WI	53703

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22649

Amount of Each Disbursement this Period

1263.65
---------

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City	State	Zip Code
MIDDLETON	WI	53562

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22651

Amount of Each Disbursement this Period

809.19
--------

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

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

3608.09
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**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 88 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ANNA LEONE**

Mailing Address 801 W JOHNSON STREET

City MADISON	State WI	Zip Code 53706
-----------------	-------------	-------------------

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22653

Amount of Each Disbursement this Period

188.99
--------

Full Name (Last, First, Middle Initial)

**B. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City BELOIT	State WI	Zip Code 53511
----------------	-------------	-------------------

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22655

Amount of Each Disbursement this Period

588.81
--------

Full Name (Last, First, Middle Initial)

**C. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City MIDDLETON	State WI	Zip Code 53562
-------------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22657

Amount of Each Disbursement this Period

290.47
--------

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

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

1068.27
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**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 89 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JASON RECTOR**

Mailing Address 1902 40TH AVENUE

City	State	Zip Code
OSCEOLA	WI	54020

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22659

Amount of Each Disbursement this Period

1739.43
---------

Full Name (Last, First, Middle Initial)

**B. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City	State	Zip Code
MAYLENE	AL	35114

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22661

Amount of Each Disbursement this Period

1608.49
---------

Full Name (Last, First, Middle Initial)

**C. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City	State	Zip Code
MAYLENE	AL	35114

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22662

Amount of Each Disbursement this Period

114.30
--------

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

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

3462.22

**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 90 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22685

Amount of Each Disbursement this Period

114.30
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City State Zip Code  
MIDDLETON WI 53562Purpose of Disbursement  
PAYROLL

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22664

Amount of Each Disbursement this Period

201.16
--------

Full Name (Last, First, Middle Initial)

**C. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City State Zip Code  
MADISON WI 53703Purpose of Disbursement  
PAYROLL

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22666

Amount of Each Disbursement this Period

446.47
--------

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

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

647.63
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**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 91 OF 110

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22679

Amount of Each Disbursement this Period

6386.56
---------

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING 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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22680

Amount of Each Disbursement this Period

26.64
-------

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING 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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22681

Amount of Each Disbursement this Period

10.83
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SUBTOTAL of Disbursements This Page (optional).....▶

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

6424.03
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**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 92 OF 110

<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

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING 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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22682

Amount of Each Disbursement this Period

77.06
-------

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING 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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22683

Amount of Each Disbursement this Period

79.00
-------

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

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

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SB30B.I22684

Amount of Each Disbursement this Period

1207.81
---------

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

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

1363.87

52540.04

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

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Transaction ID : MCW111715

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

\_\_\_\_\_ Presidential-Only Election Year (28% Federal)

☒ Presidential and Senate Election Year (36% Federal)

\_\_\_\_\_ Senate-Only Election Year (21% Federal)

\_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐  
**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal .....  %

This ratio applies to (check all that apply):

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

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

PAGE 94 OF 110

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 10 / 01 / 2015

TOTAL AMOUNT TRANSFERRED

934.63

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

934.63

Transaction ID : 112015A

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

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

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

a) .....

b) .....

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

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

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

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

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

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

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

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

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

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

PAGE 95 OF 110

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 10 / 02 / 2015

TOTAL AMOUNT TRANSFERRED

1130.47

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1130.47

Transaction ID : 112015B

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

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

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

a) .....

b) .....

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

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

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

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

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

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

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

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

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

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

PAGE 96 OF 110

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 10 / 13 / 2015

TOTAL AMOUNT TRANSFERRED

10186.78

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

10186.78

Transaction ID : 112015C

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

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

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

a) .....

b) .....

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

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

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

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

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

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

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

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

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



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

PAGE 97 OF 110

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 10 / 19 / 2015

TOTAL AMOUNT TRANSFERRED

2072.75

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

2072.75

Transaction ID : 112015D

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

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

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

a) .....

b) .....

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

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

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

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

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

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

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

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

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

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

PAGE 98 OF 110

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

TOTAL AMOUNT TRANSFERRED

1037.90

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1037.90

Transaction ID : 112015E

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

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

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

a) .....

b) .....

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

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

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

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

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

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

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

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

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

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

PAGE 99 OF 110

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	DATE OF RECEIPT M M / D D / Y Y Y Y Y 10 / 22 / 2015	TOTAL AMOUNT TRANSFERRED -10098.12
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## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....	-10098.12
Transaction ID : 112015P	
ii) Generic Voter Drive .....	
iii) Exempt Activities.....	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC) .....	

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....	5264.41
TOTAL This Period (Generic Voter Drive) .....	0.00
TOTAL This Period (Exempt Activities) .....	0.00
TOTAL This Period (Direct Fundraising) .....	0.00
TOTAL This Period (Direct Candidate Support) .....	0.00
TOTAL This Period (Public Communications Referring Only to Party) .....	0.00
TOTAL This Period (Total Amount Transferred).....	5264.41

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

Form/Schedule: H3

Transaction ID : 112015P

TRANSFER TO CORRECT FOR EXCESS TRANSFER FROM NON-FEDERAL ACCOUNT

Form/Schedule:

Transaction ID:

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

PAGE 101 OF 110

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>BMO HARRIS BANK</b>		<b>Transaction ID : 111815A</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 3052					
City MILWAUKEE	State WI	Zip Code 53201			
Purpose of Disbursement: CREDIT CARD PAYMENT				Allocated Activity or Event Year-To-Date 213074.41	
Activity or Event Identifier:		Category/ Type		Date 10 / 01 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
525.73			934.63		1460.36

<b>B. Full Name (Last, First, Middle Initial)</b> <b>COCA COLA ENTERPRISES</b>		<b>Transaction ID : 111815B</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2335 PAYSPHERE CIRCLE					
City CHICAGO	State IL	Zip Code 60674			
Purpose of Disbursement: OFFICE SODA				Allocated Activity or Event Year-To-Date 213095.51	
Activity or Event Identifier:		Category/ Type		Date 10 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.60			13.50		21.10

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ORKIN EXTERMINATING</b>		<b>Transaction ID : 111815C</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 6218					
City MADISON	State WI	Zip Code 53716			
Purpose of Disbursement: BUILDING MAINTENANCE				Allocated Activity or Event Year-To-Date 213150.51	
Activity or Event Identifier:		Category/ Type		Date 10 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
19.80			35.20		55.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
553.13		983.33		1536.46

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 102 OF 110

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>PITNEY BOWES CREDIT CORPORATION</b>		<b>Transaction ID : 111815D</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 371896					
City PITTSBURGH	State PA	Zip Code 15250			
Purpose of Disbursement: POSTAGE FOR METER				Allocated Activity or Event Year-To-Date 214340.77	
Activity or Event Identifier:		Category/ Type		Date 10 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
428.49			761.77		1190.26

<b>B. Full Name (Last, First, Middle Initial)</b> <b>PRO ONE JANITORIAL INC</b>		<b>Transaction ID : 111815E</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1101 ASHWAUBENON STREET					
City GREN BAY	State WI	Zip Code 54304			
Purpose of Disbursement: CUSTODIAL SERVICES				Allocated Activity or Event Year-To-Date 214840.77	
Activity or Event Identifier:		Category/ Type		Date 10 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
180.00			320.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ADVANCED DISPOSAL</b>		<b>Transaction ID : 111815F</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 74008053					
City CHICAGO	State IL	Zip Code 60674			
Purpose of Disbursement: WASTE REMOVAL				Allocated Activity or Event Year-To-Date 215067.51	
Activity or Event Identifier:		Category/ Type		Date 10 / 13 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
81.63			145.11		226.74

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
690.12		1226.88		1917.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 103 OF 110

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>ASPECT CONSULTING LLC</b>			<b>Transaction ID : 111815G</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8401 EXCELSIOR DRIVE								
City MADISON		State WI		Zip Code 53717				
Purpose of Disbursement: COMPLIANCE CONSULTING				Category/ Type		Allocated Activity or Event Year-To-Date 221067.51		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
2160.00						=		
			3840.00			TOTAL AMOUNT		
						6000.00		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>CENTURY SPRINGS BOTTLING CO</b>			<b>Transaction ID : 11815H</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 856858								
City MINNEAPOLIS		State MN		Zip Code 55485				
Purpose of Disbursement: OFFICE WATER				Category/ Type		Allocated Activity or Event Year-To-Date 221121.26		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
19.35						=		
			34.40			TOTAL AMOUNT		
						53.75		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>DAN MORSE CONSULTING LLC</b>			<b>Transaction ID : 111815I</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5205 BARTON ROAD								
City MADISON		State WI		Zip Code 53711				
Purpose of Disbursement: FUNDRAISING CONSULTING				Category/ Type		Allocated Activity or Event Year-To-Date 228121.26		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
2520.00						=		
			4480.00			TOTAL AMOUNT		
						7000.00		

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4699.35		8354.40		13053.75

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

PAGE 104 OF 110

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>KONICA MINOLTA PREMIER FINANCE</b>			<b>Transaction ID : 111815J</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 740423								
City ATLANTA		State GA		Zip Code 30374				
Purpose of Disbursement: COPIER LEASE				Category/ Type		Allocated Activity or Event Year-To-Date 229554.54		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
515.98				917.30				1433.28

<b>B. Full Name (Last, First, Middle Initial)</b> <b>LIND WEININGER LLC</b>			<b>Transaction ID : 111815K</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8020 EXCELSIOR DRIVE, #402								
City MADISON		State WI		Zip Code 53717				
Purpose of Disbursement: LEGAL SERVICES				Category/ Type		Allocated Activity or Event Year-To-Date 230554.54		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
360.00				640.00				1000.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>MARTIN GLASS</b>			<b>Transaction ID : 111815L</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2323 ATWOOD AVENUE								
City MADISON		State WI		Zip Code 53704				
Purpose of Disbursement: OFFICE MAINTENANCE				Category/ Type		Allocated Activity or Event Year-To-Date 230757.61		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
73.11				129.96				203.07

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
949.09		1687.26		2636.35

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>EASY PERMIT POSTAGE PITNEY BOWES</b>		<b>Transaction ID : 111815M</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 371874					
City PITTSBURGH	State PA	Zip Code 15250			
Purpose of Disbursement: POSTAGE FOR METER				Allocated Activity or Event Year-To-Date 233601.61	
Activity or Event Identifier:		Category/ Type		Date 10 / 19 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1023.84			1820.16		2844.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FLS CONNECT</b>		<b>Transaction ID : 111815N</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7300 HUDSON BOULEVARD, STE 270					
City ST PAUL	State MN	Zip Code 55128			
Purpose of Disbursement: CONFERENCE CALLS				Allocated Activity or Event Year-To-Date 233617.28	
Activity or Event Identifier:		Category/ Type		Date 10 / 19 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
5.64			10.03		15.67

<b>C. Full Name (Last, First, Middle Initial)</b> <b>LEXISNEXIS</b>		<b>Transaction ID : 111815O</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 2314					
City CAROL STREAM	State IL	Zip Code 60132			
Purpose of Disbursement: SUBSCRIPTION				Allocated Activity or Event Year-To-Date 233996.28	
Activity or Event Identifier:		Category/ Type		Date 10 / 19 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
136.44			242.56		379.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1165.92		2072.75		3238.67

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>BADGERLAND CHEMICAL &amp; SUPPLY</b>			<b>Transaction ID : 111815P</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 620303								
City MIDDLETON		State WI		Zip Code 53562				
Purpose of Disbursement: CUSTODIAL SUPPLIES				Category/ Type		Allocated Activity or Event Year-To-Date 234088.73		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="33.28"/>				<input type="text" value="59.17"/>				<input type="text" value="92.45"/>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>MADISON RECHARGING SERVICE INC</b>			<b>Transaction ID : 111815Q</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2237 WINNEBAGO STREET								
City MADISON		State WI		Zip Code 53704				
Purpose of Disbursement: FIRE EXTINGUISHERS				Category/ Type		Allocated Activity or Event Year-To-Date 234125.09		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="13.09"/>				<input type="text" value="23.27"/>				<input type="text" value="36.36"/>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>TDS MADISON</b>			<b>Transaction ID : 111815R</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 94510								
City PALATINE		State IL		Zip Code 60094				
Purpose of Disbursement: OFFICE PHONES				Category/ Type		Allocated Activity or Event Year-To-Date 234466.11		
Activity or Event Identifier:						Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="122.77"/>				<input type="text" value="218.25"/>				<input type="text" value="341.02"/>

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="169.14"/>		<input type="text" value="300.69"/>		<input type="text" value="469.83"/>

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

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

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>TDS METROCOM</b>		<b>Transaction ID : 111815S</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO BOX 94510				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City PALATINE	State IL	Zip Code 60094		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE PHONES			Category/ Type	Allocated Activity or Event Year-To-Date 235618.00	
Activity or Event Identifier:				Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
414.68			737.21		1151.89

<b>B. Full Name (Last, First, Middle Initial)</b> <b>PINKUS MCBRIDE</b>		<b>Transaction ID : 111815AA</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 301 N HAMILTON STREET				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MADISON	State WI	Zip Code 53703		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MEETING EXPENSE			Category/ Type	Allocated Activity or Event Year-To-Date 5.08	
Activity or Event Identifier:				Date <input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.83			3.25		5.08

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ADOBE CREATIVE CLOUD</b>		<b>Transaction ID : 111815BB</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 345 PARK AVENUE				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SAN JOSE	State CA	Zip Code 95110		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SOFTWARE SUBSCRIPTION			Category/ Type	Allocated Activity or Event Year-To-Date 52.74	
Activity or Event Identifier:				Date <input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2015"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.99			33.75		52.74

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
414.68		737.21		1151.89

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AMAZON</b>		<b>Transaction ID : 111815CC</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 410 TERRY AVENUE N					
City SEATTLE	State WA	Zip Code 98109			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 18.71	
Activity or Event Identifier:				Date 08 / 18 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6.74			11.97		18.71

<b>B. Full Name (Last, First, Middle Initial)</b> <b>OFFICE DEPOT</b>		<b>Transaction ID : 111815DD</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1105 XENIUM LANE N					
City PLYMOUTH	State MN	Zip Code 55441			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 6.30	
Activity or Event Identifier:				Date 08 / 19 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2.27			4.03		6.30

<b>C. Full Name (Last, First, Middle Initial)</b> <b>OFFICE DEPOT</b>		<b>Transaction ID : 111815EE</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 515 KEHOE BOULEVARD					
City CAROL STREAM	State IL	Zip Code 60188			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 245.35	
Activity or Event Identifier:				Date 08 / 19 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
88.33			157.02		245.35

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>PINKUS MCBRIDE</b>		<b>Transaction ID : 111815FF</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 301 N HAMILTON STREET				Allocated Activity or Event Year-To-Date 3.99	
City MADISON	State WI	Zip Code 53703		Date MM / DD / YYYY 08 / 19 / 2015	
Purpose of Disbursement: MEETING EXPENSE		Category/ Type		Allocated Activity or Event Year-To-Date 3.99	
Activity or Event Identifier:				Date MM / DD / YYYY 08 / 19 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.44			2.55		3.99

<b>B. Full Name (Last, First, Middle Initial)</b> <b>COPPS FOOD CENTER</b>		<b>Transaction ID : 111815GG</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1312 S PARK STREET				Allocated Activity or Event Year-To-Date 7.34	
City MADISON	State WI	Zip Code 53715		Date MM / DD / YYYY 08 / 25 / 2015	
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 7.34	
Activity or Event Identifier:				Date MM / DD / YYYY 08 / 25 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.64			4.70		7.34

<b>C. Full Name (Last, First, Middle Initial)</b> <b>MICROSOFT</b>		<b>Transaction ID : 111815HH</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 MICROSOFT WAY				Allocated Activity or Event Year-To-Date 152.00	
City REDMOND	State WA	Zip Code 98052		Date MM / DD / YYYY 08 / 31 / 2015	
Purpose of Disbursement: SOFTWARE SUBSCRIPTION		Category/ Type		Allocated Activity or Event Year-To-Date 152.00	
Activity or Event Identifier:				Date MM / DD / YYYY 08 / 31 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.72			97.28		152.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 110 OF 110

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CMDI</b>		<b>Transaction ID : 111815II</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1593 SPRING HILL ROAD					
City TYSONS CORNER	State VA	Zip Code 22182			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION				Allocated Activity or Event Year-To-Date 902.50	
Activity or Event Identifier:		Category/ Type		Date 09 / 01 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
324.90			577.60		902.50

<b>B. Full Name (Last, First, Middle Initial)</b> <b>MICROSOFT</b>		<b>Transaction ID : 111815JJ</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 MICROSOFT WAY					
City REDMOND	State WA	Zip Code 98052			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION				Allocated Activity or Event Year-To-Date 37.36	
Activity or Event Identifier:		Category/ Type		Date 09 / 01 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.45			23.91		37.36

<b>C. Full Name (Last, First, Middle Initial)</b> <b>WALL STREET JOURNAL</b>		<b>Transaction ID : 111815KK</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1211 AVENUE OF THE AMERICAS					
City NEW YORK	State NY	Zip Code 10036			
Purpose of Disbursement: SUBSCRIPTION				Allocated Activity or Event Year-To-Date 28.99	
Activity or Event Identifier:		Category/ Type		Date 09 / 03 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.44			18.55		28.99

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
8641.43	15362.52	24003.95