



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Glenn Grothman for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	101457.00	112568.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	101457.00	112568.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	78313.34	191823.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	9338.10	9338.10
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	68975.24	182485.70
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	301912.57	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	139110.00	

**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 3 (Revised 05/2016)

Write or Type Committee Name

**Glenn Grothman for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	61250.00	61750.00
(ii) Unitemized.....	19207.00	19818.00
(iii) TOTAL of contributions from individuals ▶	80457.00	81568.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	21000.00	31000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	101457.00	112568.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	9338.10	9338.10
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	110795.10	121906.10

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	78313.34	191823.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	78313.34	191823.80

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	269430.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	110795.10
25. SUBTOTAL (add Line 23 and Line 24).....	380225.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	78313.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	301912.57

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

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

FOR LINE NUMBER: PAGE 5 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ANSAY, MICHAEL, , ,**  
 Mailing Address 101 E GRAND AVENUE  
 City PORT WASHINGTON State WI Zip Code 53074-2245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANSAY & ASSOCIATES Occupation CHAIRMAN & CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2021  
**Transaction ID : SA11A.24046**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ARMSTRONG, PERRY, J., ,**  
 Mailing Address 2728 COHO STREET  
 City MADISON State WI Zip Code 53713-3015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PREFERRED TITLE Occupation CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2021  
**Transaction ID : SA11A.24037**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BACH, ROBERT, , ,**  
 Mailing Address 524 TECHNOLOGY WAY  
 City SAUKVILLE State WI Zip Code 53080-1677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2021  
**Transaction ID : SA11A.24530**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BAUZENBERGER, BARBARA, , ,**

Mailing Address **W56N1176 JAMES CIRCLE**

City **CEDARBURG** State **WI** Zip Code **53012-1203**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 22 / 2021**

**Transaction ID : SA11A.24354**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**BLALOCK, PHILIP, A., ,**

Mailing Address **305 GET A WAY LN.**

City **BAHAMA** State **NC** Zip Code **27503-9653**

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

Name of Employer **TRIANGLE ASSOCIATES** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 17 / 2021**

**Transaction ID : SA11A.24300**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**BLOMQUIST, RICHARD, , ,**

Mailing Address **2903 WEST HIDDEN LAKE ROAD**

City **MEQUON** State **WI** Zip Code **53092-5300**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2021**

**Transaction ID : SA11A.24043**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2500.00**

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

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

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

FOR LINE NUMBER: PAGE 7 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BROYDRICK, WILLIAM, , ,**

Mailing Address 1150 CONNECTICUT AVENUE NORTHWEST

City WASHINGTON State DC Zip Code 20036-4104

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

Name of Employer BROYDRICK AND ASSOCIATES Occupation CONSULTANT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2021

Transaction ID : SA11A.24048

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BUECHEL, DENNIS, , ,**

Mailing Address 385 WILLOW DRIVE

City FOND DU LAC State WI Zip Code 54935-1924

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

Name of Employer NATURAL STONE VENEERS Occupation OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

Transaction ID : SA11A.24445

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CARAWAY, JAMES , T. , ,**

Mailing Address 9364 N. LAKE DR.

City MILWAUKEE State WI Zip Code 53217-1446

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

Name of Employer SELF Occupation PRINCIPAL

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

Transaction ID : SA11A.24526

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 1750.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CAREW, JOHN, ,**

Mailing Address 2912 APPLE HILL BOULEVARD

City APPLETON State WI Zip Code 54913-7884

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

Name of Employer CAREW CONCRETE Occupation PRESIDENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2021

Transaction ID : SA11A.24041

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CARPENTER, CAROL, ANNE, ,**

Mailing Address 656 W EVERGREEN COURT

City BAYSIDE State WI Zip Code 53217-1608

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

Transaction ID : SA11A.24441

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES, DAVID, R., ,**

Mailing Address 5845 SHORE ACRES ROAD

City NEW FRANKEN State WI Zip Code 54229-9481

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

Name of Employer CASH DEPOT Occupation OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2021

Transaction ID : SA11A.24053

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 3250.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHESEBRO JR, ROBERT, E., ,**

Mailing Address 216 EUCLID AVENUE

City SHEBOYGAN	State WI	Zip Code 53083-5052
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11A.24525**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DI RAIMONDO, JOSEPH, C., ,**

Mailing Address 1636 MIRIAM ROAD

City MANITOWOC	State WI	Zip Code 54220-1843
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11A.24503**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELLIS, JOSEPH, S., ,**

Mailing Address 3205 N MARIETTA AVENUE, APT. B

City MILWAUKEE	State WI	Zip Code 53211-3133
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2021

**Transaction ID : SA11A.24331**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FEDLER, RONALD, G., MR.,**  
 Mailing Address 3291 HUNTER HOLLOW ROAD  
 City DODGEVILLE State WI Zip Code 53533-8839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GOLDLEAF DEVELOPMENT Occupation DEVELOPER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2021  
**Transaction ID : SA11A.24370**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**FEUERBACH, JOEL, , ,**  
 Mailing Address W13255 PENNY LANE  
 City RIPON State WI Zip Code 54971-9586  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021  
**Transaction ID : SA11A.24312**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**FISHER, DAVID, J., DR.,**  
 Mailing Address 408 NORTH AVENUE  
 City SHEBOYGAN State WI Zip Code 53083-5066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AURORA Occupation PHYSICIAN  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2021  
**Transaction ID : SA11A.24042**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4400.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FREY, ALAN, G., ,**

Mailing Address 961 BRIGHTON DRIVE

City MENASHA	State WI	Zip Code 54952-2944
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FEC ID number of contributing federal political committee. **C**

Name of Employer STIFEL	Occupation INVESTMENT
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Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2021

**Transaction ID : SA11A.24538**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GERARD, KEVIN, P., ,**

Mailing Address 9089 NORTH BAYSIDE DRIVE

City BAYSIDE	State WI	Zip Code 53217-1915
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation STOCK BROKER
--------------------------	----------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 05 / 2021

**Transaction ID : SA11A.24050**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GILL, RICHARD, A., ,**

Mailing Address 3610 N 48TH STREET

City SHEBOYGAN	State WI	Zip Code 53083-2557
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2021

**Transaction ID : SA11A.24185**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GROSS, THOMAS, , ,**  
 Mailing Address 910 COUNTRY CLUB LANE  
 City FOND DU LAC State WI Zip Code 54935-9702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AHERN GROSS INC. Occupation BUSINESS OWNER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021  
**Transaction ID : SA11A.24311**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GUNDLACH, TIMOTHY, , ,**  
 Mailing Address 3431 W COLETTE CT  
 City MEQUON State WI Zip Code 53092-2308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AURORA HELATHCARE MEDICAL GROUP Occupation ANESTHESIOLOGIST  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.24523**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HANLEY, THOMAS, J., ,**  
 Mailing Address N2752 SUMMERVILLE PARK ROAD  
 City LODI State WI Zip Code 53555-9642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.24474**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3900.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 13 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HARTUNG, DAN, J., MR.,**

Mailing Address 708 HEARTLAND TRAIL

City MADISON	State WI	Zip Code 53717-2172
-----------------	-------------	------------------------

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

Name of Employer HARTUNG BROTHERS INC	Occupation PRESIDENT
--	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 19 / 2021

**Transaction ID : SA11A.24040**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HERZING, HENRY, G., ,**

Mailing Address 1660 N PROSPECT AVE. UNIT 1009

City MILWAUKEE	State WI	Zip Code 53202-6706
-------------------	-------------	------------------------

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

Name of Employer HERZING COLLEGE	Occupation PRESIDENT
-------------------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11A.24504**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HOMAN, JEAN, , ,**

Mailing Address 26 DOG LEG LANE

City WAUPUN	State WI	Zip Code 53963-1284
----------------	-------------	------------------------

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

Name of Employer EDGEWOOD CHURCH	Occupation ADMIN ASST.
-------------------------------------	---------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 24 / 2021

**Transaction ID : SA11A.24314**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 74	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HORNUNG, DAVID, J.,**

Mailing Address **N5381 DE NEVEU LANE**

City <b>FOND DU LAC</b>	State <b>WI</b>	Zip Code <b>54937-9669</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 30 / 2021

**Transaction ID : SA11A.24531**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HUTTER, MARK, , ,**

Mailing Address **56 FAWN COURT**

City <b>FOND DU LAC</b>	State <b>WI</b>	Zip Code <b>54937-7753</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>MICHELS CORPORATION</b>	Occupation <b>MANAGEMENT</b>
--	---------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 15 / 2021

**Transaction ID : SA11A.24187**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**IMMEL, MIKE, , ,**

Mailing Address **N7592 TAYCHEEDA WAY**

City <b>FOND DU LAC</b>	State <b>WI</b>	Zip Code <b>54935-2721</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>IMMEL INSURANCE</b>	Occupation <b>BUSINESS OWNER</b>
--	-------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 09 / 2021

**Transaction ID : SA11A.24116**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 750.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 15 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KAMINSKY, DANIEL, , ,**

Mailing Address **W3952 ARTESIAN ROAD**

City **FOND DU LAC** State **WI** Zip Code **54937-9389**

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

Name of Employer **KAMINSKY LAW, S.C.** Occupation **LAWYER**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2021**

**Transaction ID : SA11A.24114**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**KILIAN, STEVE, , ,**

Mailing Address **4208 KETTLE RIDGE TRAIL**

City **SLINGER** State **WI** Zip Code **53086-9362**

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

Name of Employer **KILIAN MANAGEMENT SERVICES** Occupation **EXECUTIVE**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2021**

**Transaction ID : SA11A.24524**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**KLEINFELDT, RICHARD, C., ,**

Mailing Address **384 LEDGEWOOD DRIVE**

City **FOND DU LAC** State **WI** Zip Code **54937-8138**

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

Name of Employer **FOX VALLEY SAVINGS BANK** Occupation **DIRECTOR**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2021**

**Transaction ID : SA11A.24306**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

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

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

**2750.00**

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

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

FOR LINE NUMBER: PAGE 16 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KOHLER, MARY, STEWART, ,**  
Mailing Address 32111 SERENE DRIVE

City PUNTA GORDA State FL Zip Code 33982-9763

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021

Transaction ID : SA11A.24251

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KOSS, TODD, H., ,**  
Mailing Address W3953 STONERIDGE DRIVE

City FOND DU LAC State WI Zip Code 54937-6203

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

Name of Employer GRANDE CHEESE COMPANY Occupation CEO

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2021

Transaction ID : SA11A.24049

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KRESS, CAROL, , ,**  
Mailing Address PO BOX 11564

City GREEN BAY State WI Zip Code 54307-1564

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

Transaction ID : SA11A.24619

Amount of Each Receipt this Period  
5800.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

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

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

7300.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 74	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KRESS, CAROL, , ,**

Mailing Address PO BOX 11564

City GREEN BAY	State WI	Zip Code 54307-1564
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		31		2021

**Transaction ID : SA11A.24623**

Amount of Each Receipt this Period  

5800.00
---------

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**KRESS, CAROL, , ,**

Mailing Address PO BOX 11564

City GREEN BAY	State WI	Zip Code 54307-1564
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		31		2021

**Transaction ID : SA11A.24624**

Amount of Each Receipt this Period  

2900.00
---------

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**KRESS, DONALD, , ,**

Mailing Address PO BOX 11564

City GREEN BAY	State WI	Zip Code 54307-1564
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		31		2021

**Transaction ID : SA11A.24620**

Amount of Each Receipt this Period  

5800.00
---------

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KRESS, DONALD, , ,**  
 Mailing Address PO BOX 11564  
 City GREEN BAY State WI Zip Code 54307-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.24621**  
 Amount of Each Receipt this Period  
 - 2900.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**KRESS, DONALD, , ,**  
 Mailing Address PO BOX 11564  
 City GREEN BAY State WI Zip Code 54307-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.24622**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**KUECHLER, MICHAEL, , ,**  
 Mailing Address 893 COUNTRY CLUB LANE  
 City FOND DU LAC State WI Zip Code 54935-8715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JSV Occupation CPA  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2021  
**Transaction ID : SA11A.24115**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 74	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LUCKE, THOMAS, J., MR.,**

Mailing Address PO BOX 75

City WISCONSIN DELLS	State WI	Zip Code 53965-0075
-------------------------	-------------	------------------------

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

Name of Employer WILDERNESS RESORT	Occupation OWNER
---------------------------------------	---------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2021

**Transaction ID : SA11A.24184**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MCCOLLUM, KIMBAL, K., ,**

Mailing Address N9002 N SHORE COURT

City SAINT CLOUD	State WI	Zip Code 53079-1347
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11A.24443**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MILNE, JOHN, D., ,**

Mailing Address 409 G STREET SE

City WASHINGTON	State DC	Zip Code 20003-4257
--------------------	-------------	------------------------

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

Name of Employer CAPITOL MANAGEMENT	Occupation EXECUTIVE
--	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 14 / 2021

**Transaction ID : SA11A.24313**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 20 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NEWELL, DAVID, C., ,**  
 Mailing Address 3496 N MURRAY AVENUE  
 City MILWAUKEE State WI Zip Code 53211-2817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.24611**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NEWHOUSE, KRISTINE, , ,**  
 Mailing Address 46 CONCORD DRIVE  
 City FOND DU LAC State WI Zip Code 54935-2956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2021  
**Transaction ID : SA11A.24349**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**OBERNBERGER, BONNIE, A., ,**  
 Mailing Address 5927 QUAKER HILL DRIVE  
 City MOUNT PLEASANT State WI Zip Code 53406-2747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021  
**Transaction ID : SA11A.24198**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 21 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**OTTERY, HERBERT, , ,**  
 Mailing Address **N4764 CHURCH ROAD**  
 City **SAINT CLOUD** State **WI** Zip Code **53079-1646**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **OTTERY TRANSPORTATION** Occupation **OWNER**  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2021  
**Transaction ID : SA11A.24186**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**PRENTICE, ROBERT, , ,**  
 Mailing Address **203 WATERTOWN STREET**  
 City **RIPON** State **WI** Zip Code **54971-1636**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **AFK CORPORATION** Occupation **PRINCIPAL**  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.24456**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**QUICK, DOUGLAS, , ,**  
 Mailing Address **3616 WILDWOOD DRIVE**  
 City **MANITOWOC** State **WI** Zip Code **54220-2351**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RETIRED** Occupation **RETIRED**  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2021  
**Transaction ID : SA11A.24548**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 22 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RAATHS, WILLIAM, A., ,**

Mailing Address 1234 LAKESHORE DRIVE

City MENASHA State WI Zip Code 54952-1322

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

**Transaction ID : SA11A.24528**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**REARDON, TODD, , MR.,**

Mailing Address 4100 SOUTH 27TH STREET

City MILWAUKEE State WI Zip Code 53221-1830

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

Name of Employer LAKE CO. OF WISCONSIN Occupation CAR DEALER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2021

**Transaction ID : SA11A.24533**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**REY, MARK, , ,**

Mailing Address 4418 ALBEMARLE STREET NW

City WASHINGTON State DC Zip Code 20016-2014

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

Name of Employer MR. MARK REY Occupation SELF EMPLOYED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2021

**Transaction ID : SA11A.24299**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
CONTRIBUTION

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

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

\_\_\_\_\_ 1750.00

\_\_\_\_\_

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RINGHAND, DARRELL, D., ,**

Mailing Address **W4409 LIME ROAD**

City **EDEN** State **WI** Zip Code **53019-1107**

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

Name of Employer **OUTDOOR AMUSEMENTS** Occupation **BUSINESS OWNER**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2021**

**Transaction ID : SA11A.24303**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**RINGHAND, DARRELL, D., ,**

Mailing Address **W4409 LIME ROAD**

City **EDEN** State **WI** Zip Code **53019-1107**

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

Name of Employer **OUTDOOR AMUSEMENTS** Occupation **BUSINESS OWNER**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2021**

**Transaction ID : SA11A.24316**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**ROSENFELDT, JOHN, , ,**

Mailing Address **53 MARTIN PLACE**

City **FOND DU LAC** State **WI** Zip Code **54935-6203**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 08 / 2021**

**Transaction ID : SA11A.24117**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 74	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SCHNEIDER, CAROL ANN, , ,**

Mailing Address 1074 ULAO PARKWAY

City GRAFTON	State WI	Zip Code 53024-9763
-----------------	-------------	------------------------

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

Name of Employer SEEK CAREERS/STAFFING, INC.	Occupation CEO
---	-------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 30 / 2021

**Transaction ID : SA11A.24534**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHRAM, COREY, , ,**

Mailing Address 810 THOMAS STREET

City RIPON	State WI	Zip Code 54971-1804
---------------	-------------	------------------------

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

Name of Employer AFK CORPORATION	Occupation VICE PRESIDENT
-------------------------------------	------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 31 / 2021

**Transaction ID : SA11A.24455**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHRAUTH, JENNIFER, M., ,**

Mailing Address N1977 COUNTY ROAD V

City CAMPBELLSPORT	State WI	Zip Code 53010-2258
-----------------------	-------------	------------------------

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

Name of Employer ADASHUN JONES	Occupation REALTOR
-----------------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 19 / 2021

**Transaction ID : SA11A.24307**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 25 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHANNON, MICHAEL, R., , SR.**

Mailing Address 940 COUNTRY CLUB LANE

City FOND DU LAC	State WI	Zip Code 54935-9702
---------------------	-------------	------------------------

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

Name of Employer OWNER	Occupation HOLIDAY AUTO
---------------------------	----------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11A.24454**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STERN, HOWARD, F., ,**

Mailing Address 706 E LEXINGTON BOULEVARD

City MILWAUKEE	State WI	Zip Code 53217-5338
-------------------	-------------	------------------------

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

Name of Employer NORTHWESTERN MUTUAL	Occupation FINANCE
---	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2021

**Transaction ID : SA11A.24537**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STYER, BUD, M., ,**

Mailing Address W9935 MCGOWAN ROAD  
P.O. BOX 18

City LODI	State WI	Zip Code 53555-0018
--------------	-------------	------------------------

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

Name of Employer SELF	Occupation CEO
--------------------------	-------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2021

**Transaction ID : SA11A.24182**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 26 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TARANTINO, JAMES, , ,**

Mailing Address 20875 CROSSROADS CIRCLE

City WAUKESHA	State WI	Zip Code 53186-4052
------------------	-------------	------------------------

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

Name of Employer CAPRI COMMUNITIES LLC	Occupation REAL ESTATE INVESTMENT
---	--------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 ,  ,  1000.00

Date of Receipt  
 /  /

**Transaction ID : SA11A.24535**

Amount of Each Receipt this Period  
 ,  ,  1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TAYLOR, CAROL, , ,**

Mailing Address 27100 SHANANAGI LANE

City WAUKESHA	State WI	Zip Code 53188-
------------------	-------------	--------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 ,  ,  250.00

Date of Receipt  
 /  /

**Transaction ID : SA11A.24390**

Amount of Each Receipt this Period  
 ,  ,  250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VELDBOOM, GORDON, J., ,**

Mailing Address 719 S 9TH PLACE

City OOSTBURG	State WI	Zip Code 53070-1372
------------------	-------------	------------------------

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

Name of Employer OOSTBURG CONCRETE	Occupation BUSINESS OWNER
---------------------------------------	------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 ,  ,  1000.00

Date of Receipt  
 /  /

**Transaction ID : SA11A.24317**

Amount of Each Receipt this Period  
 ,  ,  1000.00

Memo Item  
CONTRIBUTION

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

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

,  ,  2250.00

,  ,

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

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

FOR LINE NUMBER: PAGE 27 OF 74  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VICTOR, STEVE, P., , JR.**

Mailing Address 776 RED FOX RUN

City: FOND DU LAC State: WI Zip Code: 54937-7628

FEC ID number of contributing federal political committee: C

Name of Employer: FEDCO BATTERIES Occupation: OWNER / ENGINEER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

Transaction ID : SA11A.24453

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VINEY, WILLIAM, , ,**

Mailing Address 25723 MEADOWHOUSE COURT

City: SOUTH RIDING State: VA Zip Code: 20152-2588

FEC ID number of contributing federal political committee: C

Name of Employer: BGR GOVERNMENT AFFAIRS Occupation: PRINCIPAL

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 22 / 2021

Transaction ID : SA11A.24323

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WADE, CHRISTY, , ,**

Mailing Address N640 O'KEEFE ROAD

City: ENDEAVOR State: WI Zip Code: 53930-9338

FEC ID number of contributing federal political committee: C

Name of Employer: ARBOR GREEN INC Occupation: PRESIDENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2021

Transaction ID : SA11A.24532

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WALL, TERRENCE, R., ,**  
Mailing Address PO BOX 620037

City MIDDLETON State WI Zip Code 53562-0037

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

Name of Employer T. WALL ENTERPRISES Occupation DEVELOPER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

Transaction ID : SA11A.24517

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WENDT, LINDA, K., ,**  
Mailing Address W6389 LINCOLN ROAD

City VAN DYNE State WI Zip Code 54979-9704

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

Name of Employer WENDT'S ON THE LAKE Occupation BUSINESS OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021

Transaction ID : SA11A.24308

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WOOD, ROBERT, , ,**  
Mailing Address 813 VICAR LANE

City ALEXANDRIA State VA Zip Code 22302-3420

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

Name of Employer BGR GROUP Occupation PRESIDENT & CEO

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2021

Transaction ID : SA11A.24536

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 29 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**YOUNG, FRED, M., MR., JR.**

Mailing Address 3201 MICHIGAN BOULEVARD

City RACINE State WI Zip Code 53402-3819

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2021

Transaction ID : SA11A.24396

Amount of Each Receipt this Period  
2900.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address 1776 WILSON BOULEVARD SUITE 530

City ARLINGTON State VA Zip Code 22209-2517

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5008.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2021

Transaction ID : SA11C.24054

Amount of Each Receipt this Period  
695.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**CARPENTER, CAROL, ANNE, ,**

Mailing Address 656 W EVERGREEN COURT

City BAYSIDE State WI Zip Code 53217-1608

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2021

Transaction ID : SA11A.24060

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

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

3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 30 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address **1776 WILSON BOULEVARD**  
**SUITE 530**

City **ARLINGTON** State **VA** Zip Code **22209-2517**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5008.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2021**

**Transaction ID : SA11C.24078**

Amount of Each Receipt this Period  
**1185.00**

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**LEE, ELEANOR, D., ,**

Mailing Address **1930 WEST RIVER BEND COURT**

City **MEQUON** State **WI** Zip Code **53092-2925**

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

Name of Employer Occupation  
**RETIRED** **RETIRED**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2021**

**Transaction ID : SA11A.24081**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**LEE, ELEANOR, D., ,**

Mailing Address **1930 WEST RIVER BEND COURT**

City **MEQUON** State **WI** Zip Code **53092-2925**

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

Name of Employer Occupation  
**RETIRED** **RETIRED**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2021**

**Transaction ID : SA11A.24104**

Amount of Each Receipt this Period  
**150.00**

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 31 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address 1776 WILSON BOULEVARD  
SUITE 530

City ARLINGTON State VA Zip Code 22209-2517

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5008.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2021

**Transaction ID : SA11C.24397**

Amount of Each Receipt this Period  
930.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**MACKINNON, JEFFERY, M., ,**

Mailing Address 3753 OLIVER STREET NORTHWEST

City WASHINGTON State DC Zip Code 20015-2531

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

Name of Employer Occupation  
FARRAGUT PARTNERS LOBBYIST

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

**Transaction ID : SA11A.24404**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	61250.00

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

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

FOR LINE NUMBER: PAGE 32 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN FOR CONGRESS INC**  
 Mailing Address PO BOX 1488  
 City JANESVILLE State WI Zip Code 53547-1488  
 FEC ID number of contributing federal political committee. **C** C00330894  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : SA11C.24028**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item  
 CONTRIBUTION  
 SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**RYAN FOR CONGRESS INC**  
 Mailing Address PO BOX 1488  
 City JANESVILLE State WI Zip Code 53547-1488  
 FEC ID number of contributing federal political committee. **C** C00330894  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2021  
**Transaction ID : SA11C.24625**  
 Amount of Each Receipt this Period  
 - 2000.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**RYAN FOR CONGRESS INC**  
 Mailing Address PO BOX 1488  
 City JANESVILLE State WI Zip Code 53547-1488  
 FEC ID number of contributing federal political committee. **C** C00330894  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2021  
**Transaction ID : SA11C.24626**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 74	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FEDEX CORPORATION POLITICAL ACTION COMMITTEE (FEDE)**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11C.24439**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT ELECTRICAL CONTRACTORS INC PAC (IEC PRIDE PAC)**

Mailing Address 2900 S QUINCY STREET 720

City ARLINGTON	State VA	Zip Code 22206-2231
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00332031

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11C.24438**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES, INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 4111 E 37TH STREET N

City WICHITA	State KS	Zip Code 67220-3203
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

**Transaction ID : SA11C.24437**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 74	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Mailing Address 7525 RED RIVER RD

City WAHPETON	State ND	Zip Code 58075-9705
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2021

**Transaction ID : SA11C.24119**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL AC**

Mailing Address 1101 KING ST, 600

City ALEXANDRIA	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021

**Transaction ID : SA11C.24434**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NELNET INC PAC (NELNET PAC)**

Mailing Address 121 S 13TH STREET

City LINCOLN	State NE	Zip Code 68508-1904
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00370015

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021

**Transaction ID : SA11C.24302**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 2500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 35 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NORTHWESTERN MUTUAL FEDERAL PAC**  
 Mailing Address 720 E WISCONSIN AVENUE  
 City MILWAUKEE State WI Zip Code 53202-4703  
 FEC ID number of contributing federal political committee. **C** C00197095  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2021  
**Transaction ID : SA11C.24045**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ON WISCONSIN PAC, INC.**  
 Mailing Address PO BOX 620066  
 City MIDDLETON State WI Zip Code 53562-0066  
 FEC ID number of contributing federal political committee. **C** C00697326  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2021  
**Transaction ID : SA11C.24384**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**OSHKOSH CORP EMPLOYEE PAC (OCEPAC)**  
 Mailing Address P.O. BOX 2566  
 City OSHKOSH State WI Zip Code 54903-2566  
 FEC ID number of contributing federal political committee. **C** C00304477  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11C.24436**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 8500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 74	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PITNEY BOWES INC. POLITICAL ACTION COMMITTEE**

Mailing Address 3001 SUMMER ST

City STAMFORD	State CT	Zip Code 06905-4317
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00339499

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021

**Transaction ID : SA11C.24301**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**REALTORS PAC**

Mailing Address 430 NORTH MICHIGAN AVE

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2021

**Transaction ID : SA11C.24420**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SENTRY INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1800 N POINT DR

City STEVENS POINT	State WI	Zip Code 54481-1253
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00545194

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2021

**Transaction ID : SA11C.24121**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 37 OF 74	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WISCONSIN PHYSICIANS SERVICE INSURANCE CORP PAC**

Mailing Address 1717 W BROADWAY

City MONONA	State WI	Zip Code 53713-1834
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00718445

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2021

**Transaction ID : SA11C.24310**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)

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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21000.00

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

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

FOR LINE NUMBER: PAGE 38 OF 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FLEXPOINT MEDIA INC**

Mailing Address P.O. BOX 1051

City: NEW ALBANY State: OH Zip Code: 43054

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

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9338.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2021

Transaction ID : SA14.3270

Amount of Each Receipt this Period  
 9338.10

Memo Item  
REFUND OF OVERPAYMENT

**B.** Full Name (Last, First, Middle Initial)

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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9338.10
<b>TOTAL</b> This Period (last page this line number only).....▶	9338.10

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. FENSKE, KELSEY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021		
Mailing Address C/O PO BOX 1215			FEC Identification Number C		
City FOND DU LAC	State WI	Zip Code 54936	Amount of Each Disbursement this Period 125.50		
Purpose of Disbursement MILEAGE		Category/ Type	Transaction ID : SB17.I3282		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. VERVELDE, RACHEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021		
Mailing Address 1532 CONSTITUTION AVE NE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 7500.00		
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type	Transaction ID : SB17.I3281		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021		
Mailing Address 140 FELL COURT			FEC Identification Number C		
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 76.00		
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3271		
Candidate Name		<input type="checkbox"/> Memo Item			
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7701.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021		
Mailing Address 140 FELL COURT			FEC Identification Number <b>C</b>		
City HAUPPAUGE	State NY	Zip Code 11788			
Purpose of Disbursement PAYROLL PROCESSING FEE			Transaction ID : <b>SB17.I3272</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>B. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2021		
Mailing Address 140 FELL COURT			FEC Identification Number <b>C</b>		
City HAUPPAUGE	State NY	Zip Code 11788			
Purpose of Disbursement PAYROLL PROCESSING FEES			Transaction ID : <b>SB17.I3290</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>C. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2021		
Mailing Address 140 FELL COURT			FEC Identification Number <b>C</b>		
City HAUPPAUGE	State NY	Zip Code 11788			
Purpose of Disbursement PAYROLL			Transaction ID : <b>SB17.I3292</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3799.22
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. FENSKE, KELSEY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2021	
Mailing Address C/O PO BOX 1215			FEC Identification Number C	
City FOND DU LAC	State WI	Zip Code 54936	Amount of Each Disbursement this Period 2405.93	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I3366	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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>B. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2021	
Mailing Address 140 FELL COURT			FEC Identification Number C	
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 76.00	
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3295	
Candidate Name		<input type="checkbox"/> Memo Item		
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>C. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2021	
Mailing Address 140 FELL COURT			FEC Identification Number C	
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 841.57	
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : SB17.I3296	
Candidate Name		<input type="checkbox"/> Memo Item		
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	917.57
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ACCOUNTANTS WORLD</b>		Date of Disbursement
Mailing Address 140 FELL COURT		M M / D D / Y Y Y Y 03 / 01 / 2021
City HAUPPAUGE	State NY	Zip Code 11788
Purpose of Disbursement PAYROLL	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 2405.92	
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) ▼	Transaction ID : SB17.I3319
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FENSKE, KELSEY, , ,</b>		Date of Disbursement
Mailing Address C/O PO BOX 1215		M M / D D / Y Y Y Y 03 / 01 / 2021
City FOND DU LAC	State WI	Zip Code 54936
Purpose of Disbursement PAYROLL	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 2405.92	
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) ▼	Transaction ID : SB17.I3365
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ACCOUNTANTS WORLD</b>		Date of Disbursement
Mailing Address 140 FELL COURT		M M / D D / Y Y Y Y 03 / 01 / 2021
City HAUPPAUGE	State NY	Zip Code 11788
Purpose of Disbursement PAYROLL PROCESSING FEE	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 76.00	
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) ▼	Transaction ID : SB17.I3320
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2481.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2021		
Mailing Address 140 FELL COURT			FEC Identification Number C		
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 841.57		
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : SB17.I3321		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021		
Mailing Address 140 FELL COURT			FEC Identification Number C		
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 2405.93		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I3358		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. FENSKE, KELSEY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021		
Mailing Address C/O PO BOX 1215			FEC Identification Number C		
City FOND DU LAC	State WI	Zip Code 54936	Amount of Each Disbursement this Period 2405.93		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I3364		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3247.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ACUITY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2021
Mailing Address P.O. BOX 718		FEC Identification Number C
City SHEBOYGAN	State WI	Zip Code 53081
Purpose of Disbursement INSURANCE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 338.85	
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) ▼	Transaction ID : SB17.I3291
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2021
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2.25	
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) ▼	Transaction ID : SB17.I3293
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2021
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 0.69	
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) ▼	Transaction ID : SB17.I3294
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	341.79
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 39.30		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3306		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 19.80		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3307		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 19.80		
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type	Transaction ID : SB17.I3309		
Candidate Name		<input type="checkbox"/> Memo Item			
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	78.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2021
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 45.82
Candidate Name		Transaction ID : SB17.I3310
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2021
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 0.69
Candidate Name		Transaction ID : SB17.I3311
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 19.80
Candidate Name		Transaction ID : SB17.I3314
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	66.31
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.69		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3318		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 2.25		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3328		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 19.80		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3333		
Candidate Name		<input type="checkbox"/> Memo Item			
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2021	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 49.65	
Purpose of Disbursement CREDIT CARD PROCESSING FEE			Transaction ID : SB17.I3336	
Candidate Name			<input type="checkbox"/> Memo Item	
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>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2021	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 15.53	
Purpose of Disbursement CREDIT CARD PROCESSING FEE			Transaction ID : SB17.I3338	
Candidate Name			<input type="checkbox"/> Memo Item	
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>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2021	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 2.25	
Purpose of Disbursement CREDIT CARD PROCESSING FEE			Transaction ID : SB17.I3339	
Candidate Name			<input type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	67.43
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 40.59		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3341		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 41.55		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3347		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2021		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 39.30		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3348		
Candidate Name		<input type="checkbox"/> Memo Item			
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	121.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Glenn Grothman for Congress**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

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: 03 / 23 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 72.30

Transaction ID : SB17.I3352

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

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: 03 / 24 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 10.05

Transaction ID : SB17.I3354

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

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: 03 / 26 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 10.05

Transaction ID : SB17.I3357

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 92.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 63.39
Candidate Name		Transaction ID : SB17.I3359
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. ASPECT CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021
Mailing Address PO BOX 620066		FEC Identification Number C
City MIDDLETON	State WI	Zip Code 53562
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 1850.00
Candidate Name		Transaction ID : SB17.I3280
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. ASPECT CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2021
Mailing Address PO BOX 620066		FEC Identification Number C
City MIDDLETON	State WI	Zip Code 53562
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 1862.50
Candidate Name		Transaction ID : SB17.I3302
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3775.89
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 74			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT EASE ADVISORS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2021		
Mailing Address 2024 EASTWOOD AVENUE			FEC Identification Number <b>C</b>		
City JANESVILLE	State WI	Zip Code 53545			
Purpose of Disbursement STRATEGY CONSULTING			Transaction ID : <b>SB17.I3287</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2021		
Mailing Address 300 1ST STREET SE			FEC Identification Number <b>C</b>		
City WASHINGTON	State DC	Zip Code 20003			
Purpose of Disbursement MEALS			Transaction ID : <b>SB17.I3289</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2021		
Mailing Address 300 1ST STREET SE			FEC Identification Number <b>C</b>		
City WASHINGTON	State DC	Zip Code 20003			
Purpose of Disbursement MEALS			Transaction ID : <b>SB17.I3308</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	27233.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 74
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address 300 1ST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEALS		Amount of Each Disbursement this Period 115.40
Candidate Name	Category/ Type	Transaction ID : SB17.I3345
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address 300 1ST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEALS		Amount of Each Disbursement this Period 92.95
Candidate Name	Category/ Type	Transaction ID : SB17.I3346
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2021
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE SOFTWARE		Amount of Each Disbursement this Period 798.00
Candidate Name	Category/ Type	Transaction ID : SB17.I3276
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1006.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2021
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 798.00	
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) ▼	Transaction ID : SB17.I3297
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2021
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 798.00	
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) ▼	Transaction ID : SB17.I3325
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CONGRESSIONAL INSTITUTE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address 1700 DIAGONAL ROAD		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement EVENT REGISTRATION	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 648.00	
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) ▼	Transaction ID : SB17.I3344
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2244.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial)  
**A. CONNECT STRATEGIC COMMUNICATIONS**

Mailing Address P.O. BOX 141251

City DALLAS State TX Zip Code 75214

Purpose of Disbursement DIGITAL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 07 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 1670.00

Transaction ID : SB17.I3283

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CONNECT STRATEGIC COMMUNICATIONS**

Mailing Address P.O. BOX 141251

City DALLAS State TX Zip Code 75214

Purpose of Disbursement ONLINE SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 09 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 1670.00

Transaction ID : SB17.I3304

Memo Item

Full Name (Last, First, Middle Initial)  
**C. GOOGLE.COM**

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 13.86

Transaction ID : SB17.I3274

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 3353.86

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 54.00	
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) ▼	Transaction ID : SB17.I3275
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GOOGLE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2021
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 67.51	
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) ▼	Transaction ID : SB17.I3298
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GOOGLE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2021
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3.54	
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) ▼	Transaction ID : SB17.I3305
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	125.05
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2021
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 13.51	
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) ▼	Transaction ID : SB17.I3327
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GOOGLE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2021
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 50.56	
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) ▼	Transaction ID : SB17.I3330
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. HIGH COTTON CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021
Mailing Address 800 W 47TH STREET #200		FEC Identification Number C
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 7950.00	
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) ▼	Transaction ID : SB17.I3284
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8014.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ISTREAM</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2021		
Mailing Address 13555 BISHOPS COURT			FEC Identification Number C		
City BROOKFIELD	State WI	Zip Code 53005	Amount of Each Disbursement this Period 27.77		
Purpose of Disbursement CHECK PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3277		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. ISTREAM</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2021		
Mailing Address 13555 BISHOPS COURT			FEC Identification Number C		
City BROOKFIELD	State WI	Zip Code 53005	Amount of Each Disbursement this Period 28.04		
Purpose of Disbursement CHECK PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3301		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. ISTREAM</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2021		
Mailing Address 13555 BISHOPS COURT			FEC Identification Number C		
City BROOKFIELD	State WI	Zip Code 53005	Amount of Each Disbursement this Period 28.30		
Purpose of Disbursement CHECK PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3323		
Candidate Name		<input type="checkbox"/> Memo Item			
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	84.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. KMS CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021
Mailing Address P.O. BOX 865		FEC Identification Number C
City MADISON	State WI	Zip Code 53701
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 3055.00
Candidate Name		Transaction ID : SB17.I3285
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KMS CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2021
Mailing Address P.O. BOX 865		FEC Identification Number C
City MADISON	State WI	Zip Code 53701
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : SB17.I3303
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RBH ENTERPRISES INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2021
Mailing Address 254 WINNEBAGO DRIVE		FEC Identification Number C
City FOND DU LAC	State WI	Zip Code 54935
Purpose of Disbursement OFFICE RENT		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : SB17.I3288
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6955.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. RBH ENTERPRISES INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2021	
Mailing Address 254 WINNEBAGO DRIVE			FEC Identification Number C	
City FOND DU LAC	State WI	Zip Code 54935	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement OFFICE RENT		Category/ Type	Transaction ID : SB17.I3313	
Candidate Name		<input type="checkbox"/> Memo Item		
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>B. ROTARY CLUB OF FOND DU LAC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021	
Mailing Address P.O. BOX 182			FEC Identification Number C	
City FOND DU LAC	State WI	Zip Code 54936	Amount of Each Disbursement this Period 253.00	
Purpose of Disbursement DUES/SUBSCRIPTIONS		Category/ Type	Transaction ID : SB17.I3278	
Candidate Name		<input type="checkbox"/> Memo Item		
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>C. SCM ASSOCIATES INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2021	
Mailing Address P.O. BOX 3064			FEC Identification Number C	
City PETERBOROUGH	State NH	Zip Code 03458	Amount of Each Disbursement this Period 4222.55	
Purpose of Disbursement DIRECT MAIL		Category/ Type	Transaction ID : SB17.I3316	
Candidate Name		<input type="checkbox"/> Memo Item		
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4675.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2021
Mailing Address 99 W 2ND STREET		FEC Identification Number C
City FOND DU LAC	State WI	Zip Code 54935
Purpose of Disbursement BOX RENTAL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 322.00	
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) ▼	Transaction ID : SB17.I3335
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021
Mailing Address PO BOX 5029		FEC Identification Number C
City WALLINGFORD	State CT	Zip Code 06492
Purpose of Disbursement TELEPHONE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 82.85	
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) ▼	Transaction ID : SB17.I3273
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2021
Mailing Address PO BOX 5029		FEC Identification Number C
City WALLINGFORD	State CT	Zip Code 06492
Purpose of Disbursement TELEPHONE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 82.97	
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) ▼	Transaction ID : SB17.I3299
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	487.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2021	
Mailing Address PO BOX 5029			FEC Identification Number C	
City WALLINGFORD	State CT	Zip Code 06492	Amount of Each Disbursement this Period 82.97	
Purpose of Disbursement TELEPHONE		Category/ Type	Transaction ID : SB17.I3326	
Candidate Name		<input type="checkbox"/> Memo Item		
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>B. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021	
Mailing Address 1776 WILSON BOULEVARD #530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.25	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3286	
Candidate Name		<input type="checkbox"/> Memo Item		
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>C. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2021	
Mailing Address 1776 WILSON BOULEVARD #530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.25	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17.I3300	
Candidate Name		<input type="checkbox"/> Memo Item		
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	85.47
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 02 / 25 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	19.83
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I3315
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 02 / 26 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	13.48
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I3317
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 01 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	8.20
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I3322
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	41.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 02 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	6.03
State: District:		Transaction ID : SB17.I3324
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 03 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	23.66
State: District:		Transaction ID : SB17.I3329
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 04 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	27.84
State: District:		Transaction ID : SB17.I3331
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	57.53
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 74	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2021
Mailing Address 1776 WILSON BOULEVARD #530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 15.60
Candidate Name		Transaction ID : SB17.I3332
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2021
Mailing Address 1776 WILSON BOULEVARD #530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 19.10
Candidate Name		Transaction ID : SB17.I3334
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2021
Mailing Address 1776 WILSON BOULEVARD #530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 2.18
Candidate Name		Transaction ID : SB17.I3337
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	36.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2021
Mailing Address 1776 WILSON BOULEVARD #530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 8.23
Candidate Name		Transaction ID : SB17.I3340
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2021
Mailing Address 1776 WILSON BOULEVARD #530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 111.53
Candidate Name		Transaction ID : SB17.I3342
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address 1776 WILSON BOULEVARD #530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 28.42
Candidate Name		Transaction ID : SB17.I3343
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	148.18
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 17 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	28.13
State: District:		Transaction ID : SB17.I3349
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 19 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	15.05
State: District:		Transaction ID : SB17.I3350
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 22 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	5.79
State: District:		Transaction ID : SB17.I3351
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	48.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 23 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	19.30
State: District:		Transaction ID : SB17.I3353
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 24 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	47.48
State: District:		Transaction ID : SB17.I3355
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 25 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	18.12
State: District:		Transaction ID : SB17.I3356
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	84.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 74			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 30 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	Transaction ID : SB17.I3360
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 31 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	Transaction ID : SB17.I3361
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD #530		M M / D D / Y Y Y Y 03 / 31 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
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) ▼	Transaction ID : SB17.I3362
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	333.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 74			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Glenn Grothman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WISCONSIN JEWISH CHRONICLE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021		
Mailing Address 1360 N PROSPECT AVENUE			FEC Identification Number C		
City MILWAUKEE	State WI	Zip Code 53202	Amount of Each Disbursement this Period 299.00		
Purpose of Disbursement MEDIA-NEWSPAPER		Category/ Type	Transaction ID : SB17.I3279		
Candidate Name		<input type="checkbox"/> Memo Item			
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>B. WISCONSIN JEWISH CHRONICLE</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2021		
Mailing Address 1360 N PROSPECT AVENUE			FEC Identification Number C		
City MILWAUKEE	State WI	Zip Code 53202	Amount of Each Disbursement this Period 269.00		
Purpose of Disbursement MEDIA-NEWSPAPER		Category/ Type	Transaction ID : SB17.I3312		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	568.00
<b>TOTAL</b> This Period (last page this line number only).....▶	78298.34

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Glenn Grothman for Congress** Transaction ID : **SC/10.7056**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Grothman, Glenn, S., ,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 1215			
City Fond du Lac	State WI	ZIP Code 54936	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 65310.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 65310.00
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<b>TERMS</b>	Date Incurred M 07 / D 18 / Y 2014	Date Due M 12 / D 31 / Y 2016	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	65310.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Glenn Grothman for Congress** Transaction ID : **KML1KJKJ**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Grothman, Glenn, S., ,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 1215			
City Fond du Lac	State WI	ZIP Code 54964	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
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<b>TERMS</b>	Date Incurred M 08 / D 04 / Y 2014	Date Due M 12 / D 01 / Y 2016	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	30000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Glenn Grothman for Congress** Transaction ID : **KML1203A**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>GROTHMAN, GLENN, S, ,</b>		<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1215			
City FOND DU LAC	State WI	ZIP Code 54936	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 13800.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 13800.00
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<b>TERMS</b>	Date Incurred M 10 <sup>M</sup> / D 30 <sup>D</sup> / Y 2014 Y	Date Due M 12 <sup>M</sup> / D 31 <sup>D</sup> / Y 2016 Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 13800.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Glenn Grothman for Congress** Transaction ID : **102318A**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>GROTHMAN, GLENN, S, ,</b>		<input type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1215			
City FOND DU LAC	State WI	ZIP Code 54936	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
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<b>TERMS</b>	Date Incurred M 10 / D 16 / Y 2018	Date Due M 12 / D 31 / Y 2028	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	30000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	139110.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.