

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Duffy for Congress

ADDRESS (number and street)

PO Box 538

Check if different than previously reported. (ACC)

Wausau

WI

54402-0538

2. FEC IDENTIFICATION NUMBER ▼

C C00464339

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

WI

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2015

M M / D D / Y Y Y Y
06 / 30 / 2015

through

M M / D D / Y Y Y Y
07 / 15 / 2015

M M / D D / Y Y Y Y
07 / 15 / 2015

M M / D D / Y Y Y Y
07 / 15 / 2015

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

Type or Print Name of Treasurer Michael Masterson

Signature of Treasurer Michael Masterson

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 15 / 2015

M M / D D / Y Y Y Y
07 / 15 / 2015

M M / D D / Y Y Y Y
07 / 15 / 2015

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Duffy for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	383575.98	632453.89
(b) Total Contribution Refunds (from Line 20(d))	0.00	5610.77
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	383575.98	626843.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	377708.16	514973.65
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	9378.78
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	377708.16	505594.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	856149.69	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 12/2003)

Write or Type Committee Name

Duffy for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	147100.00	254300.00
(ii) Unitemized.....	23203.00	41630.91
(iii) TOTAL of contributions from individuals ▶	170303.00	295930.91
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	213272.98	336522.98
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	383575.98	632453.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	22612.56
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	9378.78
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	965.18	1711.04
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	384541.16	666156.27

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	377708.16	514973.65
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	600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5010.77
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5610.77
21. OTHER DISBURSEMENTS	0.00	2022.13
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	377708.16	522606.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	849316.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	384541.16
25. SUBTOTAL (add Line 23 and Line 24).....	1233857.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	377708.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	856149.69

**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 136
(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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DAN ADAMS

Mailing Address **84 VILLA ROAD**

City **GREENVILLE** State **SC** Zip Code **29615-3052**

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

Name of Employer **THE CAPITAL CORPORATION** Occupation **BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : SA11.48561

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL ADAMSKI

Mailing Address **3117 DELLA STREET**

City **STEVENS POINT** State **WI** Zip Code **54481-5422**

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

Name of Employer **THE PINERIES BANK** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2015

Transaction ID : SA11.49016

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN R. ANDERSON

Mailing Address **330 SPRING CREEK ROAD**

City **ROCKFORD** State **IL** Zip Code **61107-1035**

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

Name of Employer **ANDERSON ENTERPRISES** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48848

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

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

3750.00

**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 6 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
LINA L. ANDERSON

Mailing Address **W4420 BASSWOOD DRIVE**

City **LAKE GENEVA** State **WI** Zip Code **53147-3906**

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

Name of Employer **SPRING CREEK PARTNERS** Occupation **BUSINESS EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : SA11.48217

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEFF AUSTIN

Mailing Address **4331 MARK HAYES COURT**

City **TYLER** State **TX** Zip Code **75709-5381**

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

Name of Employer **AUSTIN BANK** Occupation **BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48627

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ERIC AXEL

Mailing Address **2701 ENID DRIVE**

City **PLANO** State **TX** Zip Code **75093-1908**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48898

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

4950.00

**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 7 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
HARVEY BAIRD

Mailing Address **216 GRANDVIEW DR.**

City **HUDSON** State **WI** Zip Code **54016-5812**

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

Name of Employer **SELF/RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48887

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD BARR

Mailing Address **425 HUEHL ROAD BUILDING 3**

City **NORTHBROOK** State **IL** Zip Code **60062-2323**

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

Name of Employer **PARTNER** Occupation **COMMUNITY FINANCIAL SERVICE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48610

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS J. BASSFORD

Mailing Address **4380 92ND AVENUE SOUTHEAST**

City **MERCER ISLAND** State **WA** Zip Code **98040-4215**

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

Name of Employer **MONEYTREE INC.** Occupation **VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48611

Amount of Each Receipt this Period
1000.00
 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 8 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
MEREDITH A. BERG

Mailing Address 914 SALLYS ALY N

City HUDSON State WI Zip Code 54016-1176

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.48499

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN W. BLENKE JR

Mailing Address 45 LAGOON DRIVE

City HAWTHORN WOODS State IL Zip Code 60047-9112

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

Name of Employer TRANSUNION Occupation EVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48846

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM H. BOSSHARD

Mailing Address 600 SOUTH 28TH STREET

City LA CROSSE State WI Zip Code 54601-5134

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

Name of Employer BOSSHARD HOLDING Occupation BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48779

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1350.00

**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 9 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

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

Mailing Address **W302 S1634 BRANDYBROOK ROAD**

City **WAUKESHA** State **WI** Zip Code **53188-9319**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48510

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEPHEN BRENTON

Mailing Address **9001 HAWKS RESERVE LANE #203**

City **VERONA** State **WI** Zip Code **53593-8039**

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

Name of Employer **WISCONSIN HOSPITALS ASSOCIATION** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : SA11.48290

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY W. BRYANT

Mailing Address **108 NORTH BARSTOW STREET**

City **WAUKESHA** State **WI** Zip Code **53186-4928**

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

Name of Employer **CENTURY FENCE CO.** Occupation **BUS. EXEC.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48832

Amount of Each Receipt this Period
500.00
 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: (check only one)	PAGE 10 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DEE BUCHANAN

Mailing Address **2604 VALLEY DRIVE**

City **ALEXANDRIA** State **VA** Zip Code **22302-2843**

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

Name of Employer **OGILVY GOVERNMENT RELATIONS** Occupation **PRINCIPAL**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11.48896

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT BUKER

Mailing Address **9433 STATE ROAD 80 SW**

City **MOORE HAVEN** State **FL** Zip Code **33471-5795**

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

Name of Employer **U.S. SUGAR CORPORATION** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48511

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES J. BUTERA

Mailing Address **499 SOUTH CAPITOL STREET SOUTHWEST**

City **WASHINGTON** State **DC** Zip Code **20003-4037**

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

Name of Employer **JONES WALKER** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48628

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

2000.00

**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 11 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
EDWARD BUTOWSKY

Mailing Address 15455 DALLAS PKWY.

City ADDISON	State TX	Zip Code 75001-4690
-----------------	-------------	------------------------

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

Name of Employer CHAPWOOD INVESTMENTS	Occupation WEALTH MANAGER
------------------------------------------	------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : SA11.48897

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEITH CHAMBERS

Mailing Address 209 PRESTON TRAIL

City JACKSONVILLE	State TX	Zip Code 75766-9370
----------------------	-------------	------------------------

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

Name of Employer AUSTIN BANK	Occupation BANKER
---------------------------------	----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48629

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RUTH S. CHAMBERS

Mailing Address 7010 WILDGROVE AVENUE

City DALLAS	State TX	Zip Code 75214-3838
----------------	-------------	------------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11.48507

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

**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 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
AGARTHA S. CLARK

Mailing Address **23629 7TH AVENUE SOUTH**

City **DES MOINES** State **WA** Zip Code **98198-7304**

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

Name of Employer **MONEYTREE INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
06 / 09 / 2015

Transaction ID : SA11.48612

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. WM. CLARK

Mailing Address **3716 MAPLEWOOD AVENUE**

City **DALLAS** State **TX** Zip Code **75205-2827**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
05 / 08 / 2015

Transaction ID : SA11.48447

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. WM. CLARK

Mailing Address **3716 MAPLEWOOD AVENUE**

City **DALLAS** State **TX** Zip Code **75205-2827**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
05 / 08 / 2015

Transaction ID : SA11.48448

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

6400.00

**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 13 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
SALLY S. COLE

Mailing Address P.O. BOX 6190

City CAREFREE State AZ Zip Code 85377-6190

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2015

Transaction ID : SA11.48392

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SALLY S. COLE

Mailing Address P.O. BOX 6190

City CAREFREE State AZ Zip Code 85377-6190

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48930

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSEPH COLEMAN

Mailing Address 86 DEERFIELD LANE

City OSSINING State NY Zip Code 10562-2529

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

Name of Employer RITE CHECK CASHING Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48613

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

900.00

**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 14 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
JUSTIN D. DALY

Mailing Address P.O. BOX 1301

City State Zip Code
GREAT FALLS VA 22066-8301

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

Name of Employer Occupation
DALY CONSULTING GROUP OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11.48594

Amount of Each Receipt this Period
5400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JUSTIN D. DALY

Mailing Address P.O. BOX 1301

City State Zip Code
GREAT FALLS VA 22066-8301

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

Name of Employer Occupation
DALY CONSULTING GROUP OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : SA11.48594B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
JUSTIN D. DALY

Mailing Address P.O. BOX 1301

City State Zip Code
GREAT FALLS VA 22066-8301

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

Name of Employer Occupation
DALY CONSULTING GROUP OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : SA11.48621

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

5400.00

**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 136
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
RUSS DARROW JR.

Mailing Address **4664 CEDAR PARK DRIVE**

City **WEST BEND** State **WI** Zip Code **53095-9147**

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

Name of Employer **RUSS DARROW GROUP** Occupation **CHAIRMAN/CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : SA11.48223

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LORRAINE DEBRUN

Mailing Address **W7997 HOPE LAKE ROAD**

City **LAKE MILLS** State **WI** Zip Code **53551-9632**

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

Name of Employer **SELF-EMPLOYED** Occupation **DAIRY CATTLE NUTRITIONIST**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2015

Transaction ID : SA11.48371

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRISTINE DELOACH

Mailing Address **12315 BLAIR RIDGE ROAD**

City **FAIRFAX** State **VA** Zip Code **22033-1821**

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

Name of Employer **AKIN, GUMP, STRAUSS, HAUER & FIELD** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2015

Transaction ID : SA11.48289

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

3200.00

**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 16 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DARLA J. DITTRICH

Mailing Address **879 EAST PERKINS STREET**

City **MEDFORD** State **WI** Zip Code **54451-1930**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48925

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ORALEE A. DITTRICH

Mailing Address **N3308 OAK RIDGE ROAD**

City **MEDFORD** State **WI** Zip Code **54451-8130**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48928

Amount of Each Receipt this Period
400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARTY J. DRAXLER

Mailing Address **M 240 GALVIN AVENUE**

City **MARSHFIELD** State **WI** Zip Code **54449-9207**

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

Name of Employer **DRAXLER TRANSPORTATION** Occupation **DISPATCH**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48512

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1200.00

**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 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
NANCY EINHORN

Mailing Address 8205 NORTH RIVER ROAD

City State Zip Code
MILWAUKEE WI 53217-2546

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

Name of Employer Occupation
CAPITAL MIDWEST FUND VENTURE CAPITAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : SA11.48813

Amount of Each Receipt this Period
5400.00

CONTRIBUTION

SEE REATTRIBUTION

B. Full Name (Last, First, Middle Initial)
NANCY EINHORN

Mailing Address 8205 NORTH RIVER ROAD

City State Zip Code
MILWAUKEE WI 53217-2546

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

Name of Employer Occupation
CAPITAL MIDWEST FUND VENTURE CAPITAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11.48813B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)
STEPHEN EINHORN

Mailing Address 8205 N. RIVER ROAD

City State Zip Code
MILWAUKEE WI 53217-2546

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

Name of Employer Occupation
CAPITAL MIDWEST VENTURE FUND

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11.48820

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REATTRIBUTION FROM SPOUSE

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

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

5400.00

**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 18 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
HAROLD EMCH

Mailing Address 2505 E BRADFORD AVENUE APT 3203

City State Zip Code
MILWAUKEE WI 53211-4264

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 04 / 2015

Transaction ID : SA11.48429

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRED EVENSEN

Mailing Address 223 GULL DRIVE

City State Zip Code
ELYRIA OH 44035-2618

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

Name of Employer Occupation
CASHMART OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : SA11.48479

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS FARREL

Mailing Address 525 W MONROE ST

City State Zip Code
CHICAGO IL 60661-3629

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

Name of Employer Occupation
ASSOCIATED BANK BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48907

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1550.00

**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 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
RICHARD FAULKNER

Mailing Address 111 WEST SPRING VALLEY RD.,250

City RICHARDSON State TX Zip Code 75081-4060

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.48552

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRED M. FEHSENFELD

Mailing Address 149 WILLOWGATE LANE

City INDIANAPOLIS State IN Zip Code 46260-1433

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

Name of Employer CLMT Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11.48480

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BENJAMIN E. GATZKE

Mailing Address 4400 LEDGEVIEW ROAD

City FORT WORTH State TX Zip Code 76109-2545

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

Name of Employer RAPP Occupation VP - DIGITAL DELIVERY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48630

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

4950.00

**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 20 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
RONALD J. GIDWITZ

Mailing Address 225 WEST WACKER DRIVE, SUITE 1800

City State Zip Code
CHICAGO IL 60606-1274

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

Name of Employer Occupation
GCG PARTNERS PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48836

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNY GOLDBERG

Mailing Address 4 ROBLEDO DRIVE

City State Zip Code
DALLAS TX 75230-3059

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

Name of Employer Occupation
GOLD METAL RECYCLERS, LTD. CO-OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 20 / 2015

Transaction ID : SA11.48545

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARC GOLDMAN

Mailing Address BOX 8020

City State Zip Code
GARDEN CITY NY 11530-8020

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48901

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

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

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

4700.00

**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 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DIAN GRAVES STAI

Mailing Address 400 PINE STREET SUITE 1000

City State Zip Code
ABILENE TX 79601-5142

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48771

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNETH GRIFFIN

Mailing Address 131 SOUTH DEARBORN STREET

City State Zip Code
CHICAGO IL 60603-5517

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

Name of Employer Occupation
CITADEL FOUNDER AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : SA11.48514

Amount of Each Receipt this Period
 5400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KENNETH GRIFFIN

Mailing Address 131 SOUTH DEARBORN STREET

City State Zip Code
CHICAGO IL 60603-5517

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

Name of Employer Occupation
CITADEL FOUNDER AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2015

Transaction ID : SA11.48514B

Amount of Each Receipt this Period
 -2700.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

6400.00

**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 22 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
KENNETH GRIFFIN

Mailing Address 131 SOUTH DEARBORN STREET

City State Zip Code
CHICAGO IL 60603-5517

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

Name of Employer Occupation
CITADEL FOUNDER AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 04 / 2015

Transaction ID : SA11.48591

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
RICHARD W. HALE

Mailing Address 715 SOUTH CYPRESS

City State Zip Code
MARSHFIELD WI 54449-3335

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : SA11.48503

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JEFF HARRISON

Mailing Address

City State Zip Code

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : SA11.49008

Amount of Each Receipt this Period
1500.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
KENNETH HEIMAN

Mailing Address 10487 LINCOLN AVENUE

City State Zip Code
MARSHFIELD WI 54449-8603

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

Name of Employer Occupation
NASONVILLE DAIRY MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48517

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD HEITZER

Mailing Address P.O. BOX 205

City State Zip Code
SAINT GERMAIN WI 54558-0205

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

Name of Employer Occupation
R.H.H. FOAM SYSTEMS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA11.48562

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HAL HELWIG

Mailing Address P.O. BOX 39

City State Zip Code
STONE LAKE WI 54876-0039

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

Name of Employer Occupation
WI COUNTY MUTUAL INSURANCE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48944

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

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

1700.00

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

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

FOR LINE NUMBER: PAGE 24 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
HENRY G. HERZING
 Mailing Address 1660 NORTH PROSPECT AVENUE UNIT 10
 City State Zip Code
 MILWAUKEE WI 53202-6706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HERZING COLLEGE PRESIDENT
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11.48300
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BILLY HIBBS, JR.
 Mailing Address 520 SHERRY LANE
 City State Zip Code
 TYLER TX 75701-7730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HEARTLAND SECURITY INSURANCE CHAIRMAN
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : SA11.48553
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AL HILL, JR
 Mailing Address 47 HIGHLAND PARK VILLAGE #200
 City State Zip Code
 DALLAS TX 75205-2786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 A.G. HILL PARTNERS INVESTMENTS
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : SA11.48550
 Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

3950.00

**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 25 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
GENEVIEVE E. HILLIS

Mailing Address **21 EAST HURON STREET, APARTMENT 17**

City **CHICAGO** State **IL** Zip Code **60611-3855**

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

Name of Employer **DIRECT SUPPLY INC.** Occupation **DIRECTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48845

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL L. HODGES

Mailing Address **P.O. BOX 331513**

City **NASHVILLE** State **TN** Zip Code **37203-7514**

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

Name of Employer **AMSCOT FINANCIAL** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48614

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

Mailing Address **7303 GUNSSTOCK**

City **TEXARKANA** State **TX** Zip Code **75503-5465**

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

Name of Employer **DMP INVESTMENTS, INC.** Occupation **CHIEF FINANCIAL OFFICER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48632

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

6200.00

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

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

FOR LINE NUMBER: PAGE 26 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT E. HYDE

Mailing Address **3844 VIENNA STREET**

City **IRVING** State **TX** Zip Code **75038-8461**

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

Name of Employer **BANK OF TEXAS** Occupation **BANKER - LENDING OFFICER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48633

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARY L. JACKSON

Mailing Address **8923 ALPHA ROAD**

City **DALLAS** State **TX** Zip Code **75240-**

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

Name of Employer **JACKSON VAUGHN PUBLIC STRATEGIES** Occupation **MANAGING PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48634

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **580 24TH AVENUE**

City **CUMBERLAND** State **WI** Zip Code **54829-9421**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 08 / 2015

Transaction ID : SA11.48267

Amount of Each Receipt this Period
500.00
 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: (check only one)	PAGE 27 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DR. SIDNEY E. JOHNSON MD

Mailing Address 903 W 6TH STREET

City State Zip Code
MARSHFIELD WI 54449-3504

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

Name of Employer Occupation
RETIRED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SA11.48458

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
C. MORGAN JONES

Mailing Address 1785 EAST INTERSTATE 30

City State Zip Code
GARLAND TX 75043-4456

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

Name of Employer Occupation
AMERICAN PAWN SUPERSTORES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : SA11.48446

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN B. JONES

Mailing Address 450 ANATOLE LANE

City State Zip Code
CLEVELAND TN 37312-8226

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

Name of Employer Occupation
JONES MANAGEMENT GROUP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.48525

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

2000.00

**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 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
JAMES L. KEMERLING

Mailing Address 1125 EASTHILL PLACE

City State Zip Code
WAUSAU WI 54403-9219

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

Name of Employer Occupation
RIISER OIL COMPANY PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48696

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALLIE KNOLL

Mailing Address 200 WEST ELM STREET

City State Zip Code
STRATFORD WI 54484-9294

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.48229

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 11564

City State Zip Code
GREEN BAY WI 54307-1564

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11.48596

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1300.00

**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 29 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
JESS LAIRD

Mailing Address **2201 NORTHWEST LOOP 7**

City **ATHENS** State **TX** Zip Code **75751-**

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

Name of Employer **FIRST STATE BANK OF ATHENS, TEXAS** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48635

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JULIE LANG

Mailing Address **800 MARYKNOLL AVENUE**

City **MARSHFIELD** State **WI** Zip Code **54449-3419**

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

Name of Employer **LANG FURNITURE** Occupation **MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48518

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JEROME C. LIPPERT

Mailing Address **8182 APPLE ROAD**

City **PITTSVILLE** State **WI** Zip Code **54466-9320**

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

Name of Employer **NELSON-JAMES, INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48519

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
CHERYL K. LOEHR

Mailing Address 708 WELL STREET

City State Zip Code
ONALASKA WI 54650-2648

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

Name of Employer Occupation
KWIK TRIP VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48781

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
IAN MACKECHNIE

Mailing Address 4902 ANDROS DRIVE

City State Zip Code
TAMPA FL 33629-4802

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

Name of Employer Occupation
AMSCOT FINANCIAL VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.48615

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GLENN MADRIGANO

Mailing Address 4515 13TH STREET

City State Zip Code
KENOSHA WI 53144-1170

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

Name of Employer Occupation
CJ WIHL BEER DISTRIBUTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.48236

Amount of Each Receipt this Period
 250.00
 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: (check only one)	PAGE 31 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL V. MASTERSON

Mailing Address 65670 LAKE PARK ROAD

City ASHLAND State WI Zip Code 54806-2492

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

Name of Employer SELF Occupation ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48686

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVEN C. MATHY

Mailing Address N2104 VALLEY ROAD

City LA CROSSE State WI Zip Code 54601-7116

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

Name of Employer A.L.M. HOLDING COMPANY Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48782

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JIM J. MCINTYRE

Mailing Address 2101 EAGLE VALLEY LANE

City WAUSAU State WI Zip Code 54403-8157

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

Name of Employer GREENHECK FAN CORPORATION Occupation ADMINISTRATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11.48546

Amount of Each Receipt this Period
 1000.00
 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: (check only one)	PAGE 32 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM T. MCKENZIE

Mailing Address **2801 WEXFORD #505**

City **TYLER** State **TX** Zip Code **75709-5419**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48882

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUBEN MENDIOLA

Mailing Address **P.O. BOX 566300**

City **MIAMI** State **FL** Zip Code **33256-6300**

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

Name of Employer **DEALERNFA, INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : SA11.48548

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRENT MILLER

Mailing Address **4207 7TH RD. S.**

City **ARLINGTON** State **VA** Zip Code **22204-1425**

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

Name of Employer **MARSHFIELD CLINIC** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48554

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1500.00

**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 33 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

Full Name (Last, First, Middle Initial) STEVE E. MOORE		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2015
Mailing Address P.O. BOX 471		Transaction ID : SA11.48637
City ATHENS	State TX	Zip Code 75751-0471
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer FIRST STATE BANK OF ATHENS, TEXAS	Occupation EXECUTIVE VICE PRESIDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) WILLIAM LEE MOORE		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2015
Mailing Address 5430 EAST GRAND AVENUE		Transaction ID : SA11.48638
City DALLAS	State TX	Zip Code 75223-1965
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer SIGNATURE LOAN CO.	Occupation PRESIDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) CONNIE R. MULLINS		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 14 / 2015
Mailing Address 801 W 11TH STREET		Transaction ID : SA11.48475
City MARSHFIELD	State WI	Zip Code 54449-4044
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

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 34 OF 136
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
JOHN E. NELSON

Mailing Address 1010 W 5TH STREET

City State Zip Code
MARSHFIELD WI 54449-2618

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

Name of Employer Occupation
NELSON-JAMES, INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : SA11.48521

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DENNIS J. O'HARA

Mailing Address 415 OGDEN AVE.

City State Zip Code
SUPERIOR WI 54880-1043

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

Name of Employer Occupation
MIDWEST COIN CONCEPTS MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48888

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KEITH ORR

Mailing Address 8901 SUNDANCE RIDGE

City State Zip Code
TEXARKANA TX 75503-9583

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

Name of Employer Occupation
ORR AUTO AUTO DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.48551

Amount of Each Receipt this Period
 1000.00
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
KYLE PATRICK

Mailing Address **W3791 WEST RIB ROAD**

City **WESTBORO** State **WI** Zip Code **54490-9476**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48919

Amount of Each Receipt this Period
700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD PAVELSKI

Mailing Address **145 CHESHIRE WAY**

City **NAPLES** State **FL** Zip Code **34110-4408**

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

Name of Employer **HEARTLAND FARMS, INC.** Occupation **FARMING**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA11.48543

Amount of Each Receipt this Period
3000.00
 CONTRIBUTION

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

Mailing Address **145 CHESHIRE WAY**

City **NAPLES** State **FL** Zip Code **34110-4408**

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

Name of Employer **HEARTLAND FARMS, INC.** Occupation **FARMING**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2015

Transaction ID : SA11.48543B

Amount of Each Receipt this Period
-300.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

3700.00

**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 36 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
RICHARD PAVELSKI

Mailing Address 145 CHESHIRE WAY

City State Zip Code
NAPLES FL 34110-4408

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

Name of Employer Occupation
HEARTLAND FARMS, INC. FARMING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2015

Transaction ID : SA11.48589

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
RICHARD R. PAVELSKI

Mailing Address 145 CHESHIRE WAY

City State Zip Code
NAPLES FL 34110-4408

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

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.48238

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES I. PERKINS

Mailing Address P.O. BOX 288

City State Zip Code
RUSK TX 75785-0288

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

Name of Employer Occupation
CITIZENS FIRST BANK PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2015

Transaction ID : SA11.48527

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 37 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
KENNETH PETERSON

Mailing Address P.O. BOX 602

City State Zip Code
SPICEWOOD TX 78669-0602

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : SA11.48906

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
R. H. PICKENS

Mailing Address 8111 PRESTON ROAD SUITE 800
SUITE 800

City State Zip Code
DALLAS TX 75225-6316

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

Name of Employer Occupation
SELF SELF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 08 2015

Transaction ID : SA11.48449

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD W. PORTER

Mailing Address 300 NORTH LA SALLE DRIVE, SUITE 24

City State Zip Code
CHICAGO IL 60654-3406

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

Name of Employer Occupation
KIRKLAND AND ELLIS, LLP LAWYER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 29 2015

Transaction ID : SA11.48847

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 38 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

Full Name (Last, First, Middle Initial) MARY RAITT		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 09 / 2015
Mailing Address 1111 MOHAWK ROAD		Transaction ID : SA11.48281
City WILMETTE	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer RETIRED	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) MARY RAITT		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 14 / 2015
Mailing Address 1111 MOHAWK ROAD		Transaction ID : SA11.48281B
City WILMETTE	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer RETIRED	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) MARY RAITT		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 14 / 2015
Mailing Address 1111 MOHAWK ROAD		Transaction ID : SA11.48304
City WILMETTE	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer RETIRED	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....	5400.00
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 39 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
LAURA REDMAN

Mailing Address 1031 WILDER WOODS

City State Zip Code
TYLER TX 75703-5567

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

Name of Employer Occupation
COMMUNITY ACCESS, INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48899

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS E. REINHART

Mailing Address 504 COUNTRY CLUB LANE

City State Zip Code
ONALASKA WI 54650-8797

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

Name of Employer Occupation
KWIK TRIP BUSINESS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48777

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BILL RICHARDS

Mailing Address P.O. BOX 286

City State Zip Code
CHETEK WI 54728-0286

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

Name of Employer Occupation
HOME SPUNTOURS TOUR/TRAVEL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2015

Transaction ID : SA11.48884

Amount of Each Receipt this Period
 1000.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

Full Name (Last, First, Middle Initial) JUDITH RING		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2015
Mailing Address 806 GAVERNIE COURT		Transaction ID : SA11.48485
City CRESTVIEW	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SPEDEE CASH MANAGEMENT	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) FRITZ RIVERON		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 21 / 2015
Mailing Address 1010 FRANKLIN ST		Transaction ID : SA11.48549
City WAUSAU	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ASPIRUS	Occupation SURGEON	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. EVERETT G. ROEHL		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2015
Mailing Address 11574 NORTH GALVIN AVENUE		Transaction ID : SA11.48504
City MARSHFIELD	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ROEHL TRANSPORT	Occupation OWNER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
TIMOTHY R. RUPLI

Mailing Address 6627 HOLLAND STREET

City State Zip Code
MCLEAN VA 22101-1612

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

Name of Employer Occupation
T. RUPLI & ASSOCIATES CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.48616

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL J. SCHIERL

Mailing Address 111 NORTH WASHINGTON STREET, SUITE

City State Zip Code
GREEN BAY WI 54301-4257

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48940

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES SCHLOEMER

Mailing Address 8025 N GRAY LOG LANE

City State Zip Code
FOX POINT WI 53217-2954

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

Name of Employer Occupation
CONTINENTAL PROPERTIES CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2015

Transaction ID : SA11.48578

Amount of Each Receipt this Period
 500.00
 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 42 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
F. JAMES SENSENBRENNER

Mailing Address P.O. BOX 186, N76W14726 NORTHPOINT

City State Zip Code
MENOMONEE FALLS WI 53052-0186

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

Name of Employer Occupation
US HOUSE OF REPS. PUBLIC SERVANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48675

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAY SHANDS

Mailing Address 409 MUIRFIELD

City State Zip Code
LUFKIN TX 75901-7427

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

Name of Employer Occupation
FIRST BANK AND TRUST EAST TEXAS BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48639

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MATTHEW SHINNERS

Mailing Address N3347 CORTLAND LANE

City State Zip Code
ANTIGO WI 54409-9561

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

Name of Employer Occupation
ANTIGO CONSTRUCTION, INC. CONSTRUCTION MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11.48157

Amount of Each Receipt this Period
 5400.00
 CONTRIBUTION

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 43 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
MATTHEW SHINNERS

Mailing Address **N3347 CORTLAND LANE**

City **ANTIGO** State **WI** Zip Code **54409-9561**

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

Name of Employer **ANTIGO CONSTRUCTION, INC.** Occupation **CONSTRUCTION MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : SA11.48157B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

B. Full Name (Last, First, Middle Initial)
MATTHEW SHINNERS

Mailing Address **N3347 CORTLAND LANE**

City **ANTIGO** State **WI** Zip Code **54409-9561**

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

Name of Employer **ANTIGO CONSTRUCTION, INC.** Occupation **CONSTRUCTION MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : SA11.48302

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

C. Full Name (Last, First, Middle Initial)
RICK SIMON

Mailing Address **1550 S INDIANA**

City **CHICAGO** State **IL** Zip Code **60605-2857**

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

Name of Employer **PRESIDENT AND CEO** Occupation **UNITED SERVICE COMPANIES**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48883

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

1000.00

**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 44 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

Full Name (Last, First, Middle Initial) PAUL SINGER		Date of Receipt MM / DD / YYYY 06 / 01 / 2015
Mailing Address 1 WEST 81ST STREET		Transaction ID : SA11.48529
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer ELLIOT MGMT.	Occupation PRINCIPAL	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) PAUL SINGER		Date of Receipt MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1 WEST 81ST STREET		Transaction ID : SA11.48529B
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00
Name of Employer ELLIOT MGMT.	Occupation PRINCIPAL	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) PAUL SINGER		Date of Receipt MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1 WEST 81ST STREET		Transaction ID : SA11.48542
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer ELLIOT MGMT.	Occupation PRINCIPAL	CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	[MEMO ITEM] REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....	5400.00
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 45 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Duffy for Congress

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

Mailing Address **7801 WOODBINE LANE**

City **WAUSAU** State **WI** Zip Code **54401-8547**

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

Name of Employer **MARATHON CHEESE CORPORATION** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48900

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JERRY STOGNER

Mailing Address **P.O. BOX 1683**

City **MCCOMB** State **MS** Zip Code **39649-1683**

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

Name of Employer **EAST MCCOMB CHECK CASH, INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : SA11.48505

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRENT STUART

Mailing Address **2409 SPRUCE CT.**

City **KELLER** State **TX** Zip Code **76262-8832**

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

Name of Employer **CASH AMERICA INTERNATIONAL** Occupation **PRESIDENT AND CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11.48555

Amount of Each Receipt this Period
250.00

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 46 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
STUART D. TAPPER

Mailing Address **2494 MAYFLOWER AVENUE**

City **HOPKINS** State **MN** Zip Code **55305-2846**

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

Name of Employer **UN BANK COMPANY** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48617

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DON L. TAYLOR

Mailing Address **27100 SHANANAGI LANE**

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

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

Name of Employer **WAUKESHA STATE BANK** Occupation **BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SA11.48376

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WARREN J. TRYON

Mailing Address **216 9TH STREET SOUTHEAST**

City **WASHINGTON** State **DC** Zip Code **20003-2111**

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

Name of Employer **CAOITOL COUNSEL LLC** Occupation **POLICY ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48641

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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: PAGE 47 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
ELIZABETH A. UIHLEIN

Mailing Address 1396 NORTH WAUKEGAN ROAD

City State Zip Code
LAKE FOREST IL 60045-1147

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

Name of Employer Occupation
ULINE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 08 / 2015

Transaction ID : SA11.48274

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ELIZABETH A. UIHLEIN

Mailing Address 1396 NORTH WAUKEGAN ROAD

City State Zip Code
LAKE FOREST IL 60045-1147

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

Name of Employer Occupation
ULINE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48842

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

Mailing Address 1396 N WAUKEGAN ROAD

City State Zip Code
LAKE FOREST IL 60045-1147

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

Name of Employer Occupation
ULINE CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 22 / 2015

Transaction ID : SA11.48321

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 48 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
MARVA R. ULLELAND

Mailing Address **602 SOUTH WASHINGTON STREET**

City **RITZVILLE** State **WA** Zip Code **99169-2246**

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

Name of Employer **NORTHWEST FARM CREDIT SERVICES** Occupation **VP OPERATIONS**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48859

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAMELA J. VANHANDEL

Mailing Address **1916 GRANT STREET**

City **LITTLE CHUTE** State **WI** Zip Code **54140-1223**

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

Name of Employer **FOX CITIES MACHINE** Occupation **SELF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : SA11.48445

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAMELA J. VANHANDEL

Mailing Address **1916 GRANT STREET**

City **LITTLE CHUTE** State **WI** Zip Code **54140-1223**

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

Name of Employer **FOX CITIES MACHINE** Occupation **SELF**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : SA11.48803

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 49 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

Full Name (Last, First, Middle Initial)
ALEX K. VAUGHN

Mailing Address **717 WEST AVENUE D**

City State Zip Code
MIDLOTHIAN TX 76065-2536

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

Name of Employer Occupation
JACKSON VAUGHN PUBLIC STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 12 2015

Transaction ID : SA11.48642

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
JACK VICTORY

Mailing Address **4012 ETHAN THOMAS DR**

City State Zip Code
CLINTON MD 20735-4420

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

Name of Employer Occupation
CAPITOL HILL CONSULTING GROUP CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 04 2015

Transaction ID : SA11.48895

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
DONALD J. WEBER

Mailing Address **145 17TH STREET SOUTH**

City State Zip Code
LA CROSSE WI 54601-4255

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

Name of Employer Occupation
LOGISTICS HEALTH, INC. CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 24 2015

Transaction ID : SA11.48780

Amount of Each Receipt this Period
1000.00
 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: (check only one)	PAGE 50 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
PATRICK D. WHITE

Mailing Address P.O. BOX 7493

City State Zip Code
DALLAS TX 75209-0493

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

Name of Employer Occupation
FEDERAL CASH ADVANCE OF OKLAHOMA, I MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : SA11.48450

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JASON L. WILLIAMSON

Mailing Address 2262 ROAD 60

City State Zip Code
PAYNE OH 45880-9310

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

Name of Employer Occupation
WILLIAMSON INSURANCE AGENCY CROP INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48858

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DONALD R. WILSON

Mailing Address DRW 540 WEST MADISON STREET, SUITE

City State Zip Code
CHICAGO IL 60661-2555

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

Name of Employer Occupation
DRW HOLDINGS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48843

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

3450.00

**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 51 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
THOMAS WITT

Mailing Address 3325 ECHO DELLS AVE

City State Zip Code
STEVENS POINT WI 54481-5124

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

Name of Employer Occupation
ROEHL TRANSPORT, INC ADMINISTRATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : SA11.48547

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TISH H. WITTEN

Mailing Address 3912 BRYN MAWR

City State Zip Code
DALLAS TX 75225-7029

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

Name of Employer Occupation
PROPERTY PROFILES, INC. OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : SA11.48488

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DANIEL WOLFBERG

Mailing Address 1005 PINE TREE LANE

City State Zip Code
WINNETKA IL 60093-1325

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

Name of Employer Occupation
PLS FINANCIAL CO-PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48618

Amount of Each Receipt this Period
750.00
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: (check only one)	PAGE 52 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT M. WOLFBERG

Mailing Address **800 GROVE STREET**

City **GLENCOE** State **IL** Zip Code **60022-1520**

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

Name of Employer **PLS FINANCIAL** Occupation **MANAGER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.48619

Amount of Each Receipt this Period
750.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARTIN J. WONG

Mailing Address **1910 TOWNE CENTRE BOULEVARD, UNIT**

City **ANNAPOLIS** State **MD** Zip Code **21401-3737**

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

Name of Employer **THINK FINANCE** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48860

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLARD ZIEL

Mailing Address **4446 HEARTLAND DR. W.**

City **EAU CLAIRE** State **WI** Zip Code **54701-1908**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 09 / 2015

Transaction ID : SA11.48559

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

1350.00

**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 53 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

Full Name (Last, First, Middle Initial) WILLARD ZIEL		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2015	
Mailing Address 4446 HEARTLAND DR. W.		Transaction ID : SA11.48886	
City EAU CLAIRE	State WI	Zip Code 54701-1908	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) LA VONNE ZIETLOW		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 24 / 2015	
Mailing Address 2802 BERGAMOT PLACE		Transaction ID : SA11.48774	
City ONALASKA	State WI	Zip Code 54650-8322	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer KWIK TRIP	Occupation CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3700.00		

Full Name (Last, First, Middle Initial) LA VONNE ZIETLOW		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2015	
Mailing Address 2802 BERGAMOT PLACE		Transaction ID : SA11.48774B	
City ONALASKA	State WI	Zip Code 54650-8322	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -1000.00 CONTRIBUTION	
Name of Employer KWIK TRIP	Occupation CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3700.00		

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	1200.00

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

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

FOR LINE NUMBER: PAGE 54 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
LA VONNE ZIETLOW

Mailing Address **2802 BERGAMOT PLACE**

City **ONALASKA** State **WI** Zip Code **54650-8322**

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

Name of Employer **KWIK TRIP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11.48817

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
LA VONNE ZIETLOW

Mailing Address **2802 BERGAMOT PLACE**

City **ONALASKA** State **WI** Zip Code **54650-8322**

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

Name of Employer **KWIK TRIP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48775

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SEE REATTRIBUTION

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

Mailing Address **2802 BERGAMOT PLACE**

City **ONALASKA** State **WI** Zip Code **54650-8322**

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

Name of Employer **KWIK TRIP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11.48818

Amount of Each Receipt this Period
2300.00

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC) REATTRIBUTION FROM SPOUSE**

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

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

5000.00

**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 55 OF 136
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
LA VONNE ZIETLOW

Mailing Address **2802 BERGAMOT PLACE**

City **ONALASKA** State **WI** Zip Code **54650-8322**

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

Name of Employer **KWIK TRIP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
06 / 26 / 2015

Transaction ID : SA11.48775B

Amount of Each Receipt this Period
-2300.00

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION TO SPOUSE**

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

0.00

147100.00

**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 56 OF 136
	<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	

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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JEB HENSARLING

Mailing Address 3225 UNIVERSITY BLVD

City State Zip Code
DALLAS TX 75205-1976

FEC ID number of contributing federal political committee. **C C00370650**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
472.98

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.49009

Amount of Each Receipt this Period
472.98
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Mailing Address 309 EAST PACES FERRY RD NE

City State Zip Code
ATLANTA GA 30305-2367

FEC ID number of contributing federal political committee. **C C00459933**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48795

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ACE CASH EXPRESS INC PAC

Mailing Address 1231 GREENWAY DRIVE SUITE 600

City State Zip Code
IRVING TX 75038-2511

FEC ID number of contributing federal political committee. **C C00392290**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.49004

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

3972.98

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

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

FOR LINE NUMBER: PAGE 57 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
ACE GROUP HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 436 WALNUT ST

City State Zip Code
PHILADELPHIA PA 19106-3703

FEC ID number of contributing federal political committee. **C C00348938**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11.48608

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION PAC

Mailing Address 4301 WILSON BOULEVARD

City State Zip Code
ARLINGTON VA 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.48530

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ADVANCE AMERICA CASH ADVANCE CENTERS INC POLITICAL ACTION COMMITTEE

Mailing Address 135 N CHURCH STREET

City State Zip Code
SPARTANBURG SC 29306-5138

FEC ID number of contributing federal political committee. **C C00429001**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.48533

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

4000.00

**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 58 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
AICPA PAC

Mailing Address **220 LEIGH FARM ROAD**

City **DURHAM** State **NC** Zip Code **27707-8110**

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48875

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION CO

Mailing Address **1333 NEW HAMPSHIRE AVE NW**

City **D.C.** State **DC** Zip Code **20036-1500**

FEC ID number of contributing federal political committee. **C C00104901**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2015

Transaction ID : SA11.48288

Amount of Each Receipt this Period
750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALLIANZ OF AMERICA CORPORATION/FIREMAN'S FUND PAC

Mailing Address **1101 CONNECTICUT AVENUE NW
SUITE 950**

City **WASHINGTON** State **DC** Zip Code **20036-4377**

FEC ID number of contributing federal political committee. **C C00095109**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48857

Amount of Each Receipt this Period
700.00

CONTRIBUTION

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

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

3450.00

**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 59 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS PAC

Mailing Address 222 S PROSPECT AVENUE

City State Zip Code
PARK RIDGE IL 60068-4037

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SA11.48466

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC

Mailing Address 1120 CONNECTICUT AVENUE NW

City State Zip Code
WASHINGTON DC 20036-3902

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48914

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR PAC

Mailing Address 101 NORTH 3RD ST

City State Zip Code
MOORHEAD MN 56560-1952

FEC ID number of contributing federal political committee. **C C00110338**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : SA11.48324

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 60 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURERS PAC

Mailing Address 101 CONSTITUTION AVENUE NW

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48787

Amount of Each Receipt this Period
 4000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN NURSES ASSOC. PAC

Mailing Address 8515 GEORGIA AVE, STE 400

City SILVER SPRING State MD Zip Code 20910-3492

FEC ID number of contributing federal political committee. **C C00017525**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48918

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE

Mailing Address PO DRAWER 938

City THIBODAUX State LA Zip Code 70302-0938

FEC ID number of contributing federal political committee. **C C00081414**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48791

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

6000.00

**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 61 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
AMERIPRISE FINANCIAL PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 912

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00414474**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48786

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMFAM FEDERAL PAC

Mailing Address 6000 AMERICAN PARKWAY

City MADISON State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C C00354290**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48910

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASSOCIATED MILK PRODUCERS INC PAC

Mailing Address PO BOX 455

City NEW ULM State MN Zip Code 56073-0455

FEC ID number of contributing federal political committee. **C C00330696**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2015

Transaction ID : SA11.48318

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 62 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
ASSOCIATION OF PROGRESSIVE RENTAL ORGANIZATIONS PO

Mailing Address 1504 ROBINHOOD TRAIL

City State Zip Code
AUSTIN TX 78703-2624

FEC ID number of contributing federal political committee. **C C00166223**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48644

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

Mailing Address 5401 N CENTRAL EXPY

City State Zip Code
DALLAS TX 75205-3362

FEC ID number of contributing federal political committee. **C C00413856**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48650

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 501 W MICHIGAN STREET

City State Zip Code
MILWAUKEE WI 53203-2706

FEC ID number of contributing federal political committee. **C C00185694**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48855

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

4500.00

**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 63 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE SE

City State Zip Code
D.C. DC 20003-3030

FEC ID number of contributing federal political committee. **C C00364778**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11.48607

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARCLAYS GROUP US INC. POLITICAL ACTION COMMITTEE

Mailing Address 2001 K ST NW

City State Zip Code
D.C. DC 20006-1037

FEC ID number of contributing federal political committee. **C C00448852**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48793

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BATS GLOBAL MARKETS, INC POLITICAL ACTION COMMITTEE

Mailing Address 701 8TH ST NW

City State Zip Code
D.C. DC 20001-3854

FEC ID number of contributing federal political committee. **C C00458653**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2015

Transaction ID : SA11.48538

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

5000.00

**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 64 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL PAC

Mailing Address 1680 CAPITAL ONE DRIVE

City State Zip Code
MCLEAN VA 22102-3407

FEC ID number of contributing federal political committee. **C C00326595**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11.48660

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CASH AMERICA INTERNATIONAL INC. POLITICAL ACTION COMMITTEE

Mailing Address 1600 W. 7TH STREET

City State Zip Code
FORT WORTH TX 76102-2504

FEC ID number of contributing federal political committee. **C C00275529**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48653

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHECKSMART FINANCIAL LLC PAC

Mailing Address 7001 POST RD

City State Zip Code
DUBLIN OH 43016-8309

FEC ID number of contributing federal political committee. **C C00433805**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.49002

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

7500.00

**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 65 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
CHICAGO BOARD OPTIONS EXCHANGE PAC

Mailing Address 400 S. LASALLE STREET

City State Zip Code
CHICAGO IL 60605-1023

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SA11.48626

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CITIGROUP INC PAC

Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 1000

City State Zip Code
WASHINGTON DC 20004-2524

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48917

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

Mailing Address P O BOX 75000, C/O PAC SERVICES

City State Zip Code
DETROIT MI 48275-0001

FEC ID number of contributing federal political committee. **C** C00393173

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48654

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

7000.00

**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 66 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
COPART INC PAC

Mailing Address 4665 BUSINESS CENTER DR

City State Zip Code
FAIRFIELD CA 94534-1675

FEC ID number of contributing federal political committee. **C** C00452581

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48655

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CROP INSURANCE PROFESSIONALS ASSOC. PAC

Mailing Address 316 PENNSYLVANIA AVE SE
STE 401

City State Zip Code
WASHINGTON DC 20003-1172

FEC ID number of contributing federal political committee. **C** C00503680

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48789

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CULAC PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 600

City State Zip Code
WASHINGTON DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2015

Transaction ID : SA11.48411

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 67 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
CUNA MUTUAL PAC

Mailing Address **PO BOX 747**

City **MADISON** State **WI** Zip Code **53701-0747**

FEC ID number of contributing federal political committee. **C C00402107**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48645

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DELOITTE FEDERAL PAC

Mailing Address **PO BOX 365**

City **WASHINGTON** State **DC** Zip Code **20044-0365**

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48877

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENTONS US LLP PAC

Mailing Address **233 S WACKER DR
SUITE 7800**

City **CHICAGO** State **IL** Zip Code **60606-6459**

FEC ID number of contributing federal political committee. **C C00216127**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.48532

Amount of Each Receipt this Period

CONTRIBUTION

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

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 68 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DEPOSITORY TRUST AND CLEARING CORPORATION PAC

Mailing Address **601 13TH STREET NW
SUITE 580**

City **WASHINGTON** State **DC** Zip Code **20005-3807**

FEC ID number of contributing federal political committee. **C C00497917**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 01 / 2015

Transaction ID : SA11.48412

Amount of Each Receipt this Period
1850.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DIRECT SUPPLY INC. PARTNERS PAC

Mailing Address **6767 N INDUSTRIAL ROAD**

City **MILWAUKEE** State **WI** Zip Code **53223-5815**

FEC ID number of contributing federal political committee. **C C00409516**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.48531

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DIRECT SUPPLY INC. PARTNERS PAC

Mailing Address **6767 N INDUSTRIAL ROAD**

City **MILWAUKEE** State **WI** Zip Code **53223-5815**

FEC ID number of contributing federal political committee. **C C00409516**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11.48856

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

4850.00

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

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

FOR LINE NUMBER: PAGE 69 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
DISCOVER FINANCIAL SERVICES POLITICAL ACTION COMMITTEE

Mailing Address 500 8TH STREET NW
SUITE 210

City State Zip Code
WASHINGTON DC 20004-2131

FEC ID number of contributing federal political committee. **C C00438051**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11.48491

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DLA PIPER LLP (US) POLITICAL ACTION COMMITTEE (DLA

Mailing Address 500 8TH ST NW

City State Zip Code
D.C. DC 20004-2131

FEC ID number of contributing federal political committee. **C C00151340**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.49007

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EQUIFAX PAC

Mailing Address PO BOX 4081

City State Zip Code
ATLANTA GA 30302-4081

FEC ID number of contributing federal political committee. **C C00143867**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48874

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 70 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
ERNST & YOUNG PAC

Mailing Address 1101 NEW YORK AVENUE NW

City State Zip Code
WASHINGTON DC 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48851

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EXPRESS SCRIPTS INC PAC

Mailing Address ONE EXPRESS WAY

City State Zip Code
SAINT LOUIS MO 63121-1824

FEC ID number of contributing federal political committee. **C C00365072**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015

Transaction ID : SA11.48506

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FINANCIAL SERVICE CENTERS OF AMERICA, INC. PAC

Mailing Address 21 MAIN ST

City State Zip Code
HACKENSACK NJ 07601-7054

FEC ID number of contributing federal political committee. **C C00232843**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.49003

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

7500.00

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

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

FOR LINE NUMBER: PAGE 71 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
FIRST COMMAND FINANCIAL PLANNING, INC. PAC

Mailing Address 1 FIRST COMM PLAZA

City State Zip Code
FT. WORTH TX 76109-4978

FEC ID number of contributing federal political committee. **C** C00325647

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48652

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GRAND TRUNK WESTERN RR CO - ILLINOIS CENTRAL RR CO PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 500

City State Zip Code
WASHINGTON DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00095117

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2015

Transaction ID : SA11.48410

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GUARDIAN LIFE PAC

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NEW YORK NY 10004-2616

FEC ID number of contributing federal political committee. **C** C00173393

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48785

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4200.00

**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 72 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
HOME DEPOT INC PAC

Mailing Address 1155 F STREET NW
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48947

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOME DEPOT INC PAC

Mailing Address 1155 F STREET NW
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48948

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INDEPENDENT BANKERS ASSOCIATION OF TEXAS PAC

Mailing Address 1700 RIO GRANDE ST.
STE 100

City AUSTIN State TX Zip Code 78701-1683

FEC ID number of contributing federal political committee. **C C00332841**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48648

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

8000.00

**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 73 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS PAC

Mailing Address 1615 L STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : SA11.48661

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC

Mailing Address 20 F STREET, NW SUITE 610
SUITE 300

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48790

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE PAC

Mailing Address 1401 H STREET NW
1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 28 / 2015

Transaction ID : SA11.48351

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

7000.00

**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 74 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE PAC

Mailing Address 1401 H STREET NW
1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C C00105981**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11.48492

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHNSON CONTROLS, INC PAC

Mailing Address 5757 N GREEN BAY AVENUE

City MILWAUKEE State WI Zip Code 53209-4408

FEC ID number of contributing federal political committee. **C C00343095**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2015

Transaction ID : SA11.48352

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JPMORGAN CHASE & CO. PAC

Mailing Address 10 S DEARBORN STREET

City CHICAGO State IL Zip Code 60603-2300

FEC ID number of contributing federal political committee. **C C00128512**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48873

Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

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

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

5000.00

**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 75 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
KINECTA FEDERAL CREDIT UNION FEDERAL PAC

Mailing Address 1440 ROSECRANS AVE

City State Zip Code
MANHATTAN BEACH CA 90266-3702

FEC ID number of contributing federal political committee. **C C00430066**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2015

Transaction ID : SA11.49001

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address 600 14TH STREET NW
SUITE 800

City State Zip Code
WASHINGTON DC 20005-2099

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48870

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LIUNA PAC

Mailing Address 905 16TH STREET NW

City State Zip Code
WASHINGTON DC 20006-1703

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.48537

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 76 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
LOCKE LORD BISSELL & LIDDELL LLP PAC

Mailing Address 600 TRAVIS STREET
STE 2800

City HOUSTON State TX Zip Code 77002-2914

FEC ID number of contributing federal political committee. **C** C00117861

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : SA11.48523

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE CO PAC

Mailing Address 1295 STATE STREET

City SPRINGFIELD State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2015

Transaction ID : SA11.48536

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE CO PAC

Mailing Address 1295 STATE STREET

City SPRINGFIELD State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11.48658

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 77 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. MASTERCARD INTERNATIONAL INC EMPLOYEES PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 PURCHASE STREET
 City PURCHASE State NY Zip Code 10577-2405
 FEC ID number of contributing federal political committee. **C C00410274**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015
Transaction ID : SA11.48852
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2111 MCDONALDS DRIVE DEPT. 213
 City OAK BROOK State IL Zip Code 60523-5500
 FEC ID number of contributing federal political committee. **C C00063164**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : SA11.48604
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. MCGRAW HILL FINANCIAL INC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 AVENUE OF THE AMERICAS 48TH F
 City NEW YORK State NY Zip Code 10020-1001
 FEC ID number of contributing federal political committee. **C C00494682**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.48949
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

4500.00

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

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

FOR LINE NUMBER: PAGE 78 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POL. PARTICIPATION FUND A - FEDERAL ONLY

Mailing Address 1095 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10036-6797

FEC ID number of contributing federal political committee. **C** C00493551

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 06 / 2015

Transaction ID : SA11.48434

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POL. PARTICIPATION FUND A - FEDERAL ONLY

Mailing Address 1095 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10036-6797

FEC ID number of contributing federal political committee. **C** C00493551

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48853

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POL. PARTICIPATION FUND A - FEDERAL ONLY

Mailing Address 1095 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10036-6797

FEC ID number of contributing federal political committee. **C** C00493551

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48854

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

6000.00

**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 79 OF 136
	<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)
Duffy for Congress

A. MINN-DAK FARMERS COOPERATIVE SUGAR PAC

Full Name (Last, First, Middle Initial)
Mailing Address 7525 RED RIVER ROAD

City WAHPETON State ND Zip Code 58075-9705

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11.48605

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MORGAN STANLEY PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1585 BROADWAY FLOOR 9

City NEW YORK State NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48879

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. MORPAC

Full Name (Last, First, Middle Initial)
Mailing Address 1717 RHODE ISLAND AVENUE NW SUITE 400

City WASHINGTON State DC Zip Code 20036-3023

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2015

Transaction ID : SA11.48534

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 80 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1919 M ST NW

City State Zip Code
D.C. DC 20036-3521

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48651

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR COURT

City State Zip Code
FALLS CHURCH VA 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11.48609

Amount of Each Receipt this Period
 1300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD
SUITE 400

City State Zip Code
ARLINGTON VA 22203-4168

FEC ID number of contributing federal political committee. **C C00113241**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48649

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 81 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR COURT

City State Zip Code
FALLS CHURCH VA 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48871

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 122 C STREET NW
SUITE 540

City State Zip Code
WASHINGTON DC 20001-2102

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48915

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR T

Mailing Address CORDOVA

City State Zip Code
FRANKLIN TN 37067-

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11.48816

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 82 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL PROPANE GAS ASSOCIATION POLITICAL ACTION

Mailing Address 1899 L ST NW

City State Zip Code
D.C. DC 20036-3804

FEC ID number of contributing federal political committee. **C C00079681**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 20 / 2015

Transaction ID : SA11.48320

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL TELECOMMUNICATIONS COOPERATIVE ASSN. PAC

Mailing Address 4121 WILSON BOULEVARD
FLOOR 10

City State Zip Code
ARLINGTON VA 22203-1839

FEC ID number of contributing federal political committee. **C C00004473**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.48252

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS POLITICAL ACTION COM

Mailing Address 1 NATIONWIDE PLAZA
1-32-301

City State Zip Code
COLUMBUS OH 43215-2226

FEC ID number of contributing federal political committee. **C C00406215**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11.48313

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 83 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
NMHC PAC

Mailing Address 1850 M STREET NW
SUITE 540

City WASHINGTON State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48912

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

3500.00

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SA11.48625

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

1000.00

C. Full Name (Last, First, Middle Initial)
PANHANDLE PEANUT GROWERS PAC

Mailing Address PO BOX 361

City WELLINGTON State TX Zip Code 79095-0361

FEC ID number of contributing federal political committee. **C C00382507**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48788

Amount of Each Receipt this Period
500.00
CONTRIBUTION

500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 84 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
PLS GOOD NEIGHBOR PAC

Mailing Address **1 S WACKER DRIVE**
36TH FLOORE

City **CHICAGO** State **IL** Zip Code **60606-4614**

FEC ID number of contributing federal political committee. **C C00450189**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.48647

Amount of Each Receipt this Period
3500.00
CONTRIBUTION

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

Mailing Address **249 5TH AVENUE**

City **PITTSBURGH** State **PA** Zip Code **15222-2707**

FEC ID number of contributing federal political committee. **C C00035519**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 20 / 2015

Transaction ID : SA11.48319

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PNC PAC

Mailing Address **249 5TH AVENUE**

City **PITTSBURGH** State **PA** Zip Code **15222-2707**

FEC ID number of contributing federal political committee. **C C00035519**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : SA11.48659

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

7000.00

**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 85 OF 136
	<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)
Duffy for Congress

A. PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION

Full Name (Last, First, Middle Initial)
Mailing Address 711 HIGH ST

City State Zip Code
DES MOINES IA 50392-0001

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.49006

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. PROFESSIONAL INSURANCE AGENTS PAC

Full Name (Last, First, Middle Initial)
Mailing Address 400 N WASHINGTON STREET

City State Zip Code
ALEXANDRIA VA 22314-2366

FEC ID number of contributing federal political committee. **C** C00004994

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48880

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. PROPERTY CASUAL INSURANCE PAC

Full Name (Last, First, Middle Initial)
Mailing Address 8700 WEST BRYN MAWR

City State Zip Code
CHICAGO IL 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11.48490

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

8500.00

**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 86 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
RAC GOOD GOVERNMENT PAC

Mailing Address 5501 HEADQUARTERS DRIVE

City PLANO State TX Zip Code 75024-5837

FEC ID number of contributing federal political committee. **C** C00410324

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48643

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611-4011

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2015

Transaction ID : SA11.49005

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SAFARI CLUB PAC

Mailing Address 4800 W GATES PASS ROAD

City TUCSON State AZ Zip Code 85745-9600

FEC ID number of contributing federal political committee. **C** C00122101

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48909

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 87 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
SECURIAN, INC PAC

Mailing Address 400 ROBERT ST N

City State Zip Code
ST PAUL MN 55101-2037

FEC ID number of contributing federal political committee. **C** C00120006

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48850

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SECURITIES INDUSTRY & FINANCIAL MARKETS ASSOCIATION PAC

Mailing Address 1101 NEW YORK AVENUE NW
SUITE 800

City State Zip Code
WASHINGTON DC 20005-4279

FEC ID number of contributing federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48950

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SENTRY INSURANCE A MUTUAL COMPANY FEDERAL POLITICA

Mailing Address 10 E DOTY ST

City State Zip Code
MADISON WI 53703-3376

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48913

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

7000.00

**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 88 OF 136
	<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)
Duffy for Congress

A. SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 500, 83550 COUNTY RD 21

City RENVILLE State MN Zip Code 56284-0500

FEC ID number of contributing federal political committee. **C C00166348**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : SA11.48815

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. SUNTRUST PAC

Full Name (Last, First, Middle Initial)
Mailing Address 919 E MAIN STREET

City RICHMOND State VA Zip Code 23219-4625

FEC ID number of contributing federal political committee. **C C00386524**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11.48489

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. THE FINANCIAL SERVICES ROUNDTABLE PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1001 PENNSYLVANIA AVENUE NW
SUITE 500

City WASHINGTON State DC Zip Code 20004-2508

FEC ID number of contributing federal political committee. **C C00193177**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.48792

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 89 OF 136
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP, INC. PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 1000E

City WASHINGTON State DC Zip Code 20001-2171

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2015

Transaction ID : SA11.48353

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COM

Mailing Address 101 CONSTITUTION AVE NW

City D.C. State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48951

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COM

Mailing Address 101 CONSTITUTION AVE NW

City D.C. State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48952

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

4000.00

**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 90 OF 136
	<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	

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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
THE OPTIONS CLEARING CORPORATION PAC

Mailing Address 1 N UPPER WACKER DR

City CHGO State IL Zip Code 60606-

FEC ID number of contributing federal political committee. **C** C00255877

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48911

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE TRAVELERS COMPANIES INC PAC

Mailing Address 1 TOWER SQUARE

City HARTFORD State CT Zip Code 06183-0001

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2015

Transaction ID : SA11.48535

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE VANGUARD GROUP COMMITTEE FOR RESPONSIBLE GOVER

Mailing Address 975 F ST NW

City D.C. State DC Zip Code 20004-1454

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48872

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 91 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
THRIVENT FINANCIAL FOR LUTHERANS EMPLOYEE PAC

Mailing Address PO BOX 1892

City State Zip Code
APPLETON WI 54912-1892

FEC ID number of contributing federal political committee. **C C00121319**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.48849

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 800

City State Zip Code
WASHINGTON DC 20004-2526

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : SA11.48646

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TUESDAY GROUP PAC

Mailing Address PO BOX 11586

City State Zip Code
WASHINGTON DC 20008-0786

FEC ID number of contributing federal political committee. **C C00433060**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.48916

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 92 OF 136
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
TYCO INTERNATIONAL EMPLOYEES PAC

Mailing Address **9 ROSZEL ROAD**

City **PRINCETON** State **NJ** Zip Code **08540-6205**

FEC ID number of contributing federal political committee. **C C00113753**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11.48606

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
U.S. BANCORP FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **950 F ST NW**

City **D.C.** State **DC** Zip Code **20004-1438**

FEC ID number of contributing federal political committee. **C C00488882**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48878

Amount of Each Receipt this Period
3500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC COROPORATION FUND FOR EFFECTIVE GOVERNMENT PAC

Mailing Address **600 13TH STREET NW
SUITE 340**

City **WASHINGTON** State **DC** Zip Code **20005-3012**

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48953

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

5500.00

**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 93 OF 136
	<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)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
UPS PAC

Mailing Address **55 GLENLAKE PARKWAY NE**

City **ATLANTA** State **GA** Zip Code **30328-3474**

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48881

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address **702 SW 8TH ST**

City **BENTONVILLE** State **AR** Zip Code **72712-6209**

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.48876

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WESTERN PEANUT GROWERS PAC

Mailing Address **BOX 252**

City **SEMINOLE** State **TX** Zip Code **79360-0252**

FEC ID number of contributing federal political committee. **C C00254847**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11.48794

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

6500.00

213272.98

**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 94 OF 136
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. FRIENDLY CHECK CASHING

Full Name (Last, First, Middle Initial)
Mailing Address 259 BROAD STREET

City State Zip Code
NEWARK NJ 07104-3830

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11.48587

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

DETERMINED TO BE CORP: REFUNDED JULY 2015

B. RIVER VALLEY BANK

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 777

City State Zip Code
WAUSAU WI 54402-0777

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
465.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2015

Transaction ID : SA11.49013

Amount of Each Receipt this Period
 162.23

INTEREST

C. RIVER VALLEY BANK

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 777

City State Zip Code
WAUSAU WI 54402-0777

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
465.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : SA11.49014

Amount of Each Receipt this Period
 167.69

INTEREST

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

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

829.92

**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 95 OF 136	
	<input 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 checked="" type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Duffy for Congress

A. Full Name (Last, First, Middle Initial)
RIVER VALLEY BANK

Mailing Address **PO BOX 777**

City **WAUSAU** State **WI** Zip Code **54402-0777**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **465.18**

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.49015

Amount of Each Receipt this Period
135.26

INTEREST

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

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

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

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

135.26

965.18

**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 96 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. SEAN DUFFY		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address P.O. BOX 538		Amount of Each Disbursement this Period 1709.05 Transaction ID : SB17.I6039
City WAUSAU State WI Zip Code 54402-0538	Purpose of Disbursement MILEAGE REIMBURSEMENT	
Candidate Name SEAN DUFFY	Category/Type	
Office Sought: <input checked="" 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: WI District: 07		

Full Name (Last, First, Middle Initial) B. SEAN DUFFY		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2015
Mailing Address P.O. BOX 538		Amount of Each Disbursement this Period 1343.23 Transaction ID : SB17.I6040
City WAUSAU State WI Zip Code 54402-0538	Purpose of Disbursement MILEAGE REIMBURSEMENT	
Candidate Name SEAN DUFFY	Category/Type	
Office Sought: <input checked="" 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: WI District: 07		

Full Name (Last, First, Middle Initial) C. FRIENDS OF JEB HENSARLING		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2015
Mailing Address 3225 UNIVERSITY BLVD		Amount of Each Disbursement this Period 472.98 Transaction ID : SB17.49009
City DALLAS State TX Zip Code 75205-1976	Purpose of Disbursement IN-KIND CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3525.26
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 97 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. FRIENDS OF JEB HENSARLING		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2015
Mailing Address PO BOX 820504		Amount of Each Disbursement this Period 472.98
City DALLAS State TX Zip Code 75382-0504	Purpose of Disbursement LIST RENTAL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6189
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 77 W WACKER DRIVE		Amount of Each Disbursement this Period 868.20
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6116
State: District:		

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2015
Mailing Address 77 W WACKER DRIVE		Amount of Each Disbursement this Period 347.10
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6117
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1688.28
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 98 OF 136
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2015
Mailing Address 77 W WACKER DRIVE		Amount of Each Disbursement this Period 55.00
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6118
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. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 77 W WACKER DRIVE		Amount of Each Disbursement this Period 349.60
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6119
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 320 1ST STREET SE		Amount of Each Disbursement this Period 20000.00
City WASHINGTON State DC Zip Code 20003-1838	Purpose of Disbursement CONTRIBUTION TO COMMITTEE	
Candidate Name	Category/Type	Transaction ID : SB17.I6097
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	200404.60
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 99 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. DAVE ANDERSON		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 3409 SCHOFIELD AVE		Amount of Each Disbursement this Period 226.83 Transaction ID : SB17.I6034
City SCHOFIELD State WI Zip Code 54476-2579	Purpose of Disbursement EVENT PHOTOGRAPHY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. JESSE GARZA		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2015
Mailing Address 885 TROUT BROOK ROAD		Amount of Each Disbursement this Period 316.75 Transaction ID : SB17.I6035
City HUDSON State WI Zip Code 54016-7418	Purpose of Disbursement MILEAGE REIMBURSEMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LAURA GRALTON		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address W330 N4298 GLEN PARC CR		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.I6036
City NASHOTAH State WI Zip Code 53058	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2543.58
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 100 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. LAURA GRALTON		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address W330 N4298 GLEN PARC CR		Amount of Each Disbursement this Period 834.51
City NASHOTAH State WI Zip Code 53058	Purpose of Disbursement EXPENSE REIMBURSEMENT	
Candidate Name	Category/Type	Transaction ID : SB17.I6037
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. LAURA GRALTON		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address W330 N4298 GLEN PARC CR		Amount of Each Disbursement this Period 4149.96
City NASHOTAH State WI Zip Code 53058	Purpose of Disbursement ACCOUNTS PAYABLE	
Candidate Name	Category/Type	Transaction ID : SB17.I6038
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. JEFF HARRISON		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address		Amount of Each Disbursement this Period 1500.00
City State Zip Code	Purpose of Disbursement IN-KIND CONTRIBUTION	
Candidate Name	Category/Type	Transaction ID : SB17.49008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6484.47
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 101 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. CHANDLER SWANSEN			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015	
Mailing Address 6902 WESTON RIDGE DR #40			Amount of Each Disbursement this Period 430.88	
City WESTON	State WI	Zip Code 54476	Transaction ID : SB17.I6032	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type		
Candidate Name				
Office Sought:	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. CHANDLER SWANSEN			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address 6902 WESTON RIDGE DR #40			Amount of Each Disbursement this Period 561.28	
City WESTON	State WI	Zip Code 54476	Transaction ID : SB17.I6033	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 155.80	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6041	
Purpose of Disbursement PAYROLL TAX		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1147.96
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 102 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 45.00	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6042	
Purpose of Disbursement PAYROLL PROCESSING FEES		Category/ Type		
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: _____			

Full Name (Last, First, Middle Initial) B. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 1358.97	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6043	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type		
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: _____			

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 607.11	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6044	
Purpose of Disbursement PAYROLL TAX		Category/ Type		
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: _____			

SUBTOTAL of Disbursements This Page (optional)	2011.08
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 103 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 45.00
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL PROCESSING FEES	Transaction ID : SB17.I6045
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 1358.97
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL EXPENSES	Transaction ID : SB17.I6046
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 596.91
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I6047
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.88
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 104 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 1358.97	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6048	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type		
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:				

Full Name (Last, First, Middle Initial) B. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 45.00	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6049	
Purpose of Disbursement PAYROLL PROCESSING FEES		Category/ Type		
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:				

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 451.71	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6050	
Purpose of Disbursement PAYROLL TAX		Category/ Type		
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:				

SUBTOTAL of Disbursements This Page (optional).....	1855.68
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 105 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 145.20	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6051	
Purpose of Disbursement PAYROLL TAX		Category/ Type		
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:				

Full Name (Last, First, Middle Initial) B. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 1358.97	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6052	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type		
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:				

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015	
Mailing Address 140 FELL COURT			Amount of Each Disbursement this Period 45.00	
City HAUPPAUGE	State NY	Zip Code 11788	Transaction ID : SB17.I6053	
Purpose of Disbursement PAYROLL PROCESSING FEES		Category/ Type		
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:				

SUBTOTAL of Disbursements This Page (optional).....	1549.17
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 106 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 451.71 Transaction ID : SB17.I6054
City HAUPPAUGE State NY Zip Code 11788	Purpose of Disbursement PAYROLL TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 145.20 Transaction ID : SB17.I6055
City HAUPPAUGE State NY Zip Code 11788	Purpose of Disbursement PAYROLL TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.I6056
City HAUPPAUGE State NY Zip Code 11788	Purpose of Disbursement PAYROLL PROCESSING FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	641.91
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 107 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 1358.97 Transaction ID : SB17.I6057
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL EXPENSES	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 592.83 Transaction ID : SB17.I6058
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL TAX	Category/ Type
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:	

Full Name (Last, First, Middle Initial) C. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 1358.97 Transaction ID : SB17.I6059
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL EXPENSES	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	3310.97
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 108 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2015
Mailing Address 140 FELL COURT		Amount of Each Disbursement this Period 45.00
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL PROCESSING FEES	Transaction ID : SB17.I6060
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 4333 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 389.10
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I6062
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 4333 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 33.39
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I6063
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	467.49
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 109 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ASHBY LAW PLLC		Date of Disbursement MM / DD / YYYY 04 / 03 / 2015
Mailing Address 919 PRINCE STREET		Amount of Each Disbursement this Period \$ 2400.00 Transaction ID : SB17.I6064
City ALEXANDRIA	State VA	
Zip Code 22314-3008	Purpose of Disbursement LEGAL SERVICES	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. ASHBY LAW PLLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2015
Mailing Address 919 PRINCE STREET		Amount of Each Disbursement this Period \$ 600.00 Transaction ID : SB17.I6065
City ALEXANDRIA	State VA	
Zip Code 22314-3008	Purpose of Disbursement LEGAL SERVICES	Category/ Type
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:	

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING LLC		Date of Disbursement MM / DD / YYYY 04 / 03 / 2015
Mailing Address 8401 EXCELSIOR DRIVE #103 SUITE 103		Amount of Each Disbursement this Period \$ 4500.00 Transaction ID : SB17.I6066
City MADISON	State WI	
Zip Code 53717-2908	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	\$ 7500.00
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 110 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 8401 EXCELSIOR DRIVE #103 SUITE 103		Amount of Each Disbursement this Period 1500.00
City MADISON State WI Zip Code 53717-2908	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.I6067
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. BACK WHEN CAFE		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 606 3RD STREET		Amount of Each Disbursement this Period 1086.18
City WAUSAU State WI Zip Code 54403-4831	Purpose of Disbursement EVENT CATERING	
Candidate Name	Category/Type	Transaction ID : SB17.I6070
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. C M D I		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 758.10
City TYSONS CORNER State VA Zip Code 22182-2245	Purpose of Disbursement DATABASE SOFTWARE	
Candidate Name	Category/Type	Transaction ID : SB17.I6074
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3344.28
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 111 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. C M D I		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 758.10
City TYSONS CORNER	State VA	Transaction ID : SB17.I6075
Zip Code 22182-2245	Purpose of Disbursement DATABASE SOFTWARE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 117 N SAINT ASAPH STREET		Amount of Each Disbursement this Period 1592.63
City ALEXANDRIA	State VA	Transaction ID : SB17.I6071
Zip Code 22314-3109	Purpose of Disbursement CREDIT CARD PROCESSING FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 117 N SAINT ASAPH STREET		Amount of Each Disbursement this Period 463.39
City ALEXANDRIA	State VA	Transaction ID : SB17.I6072
Zip Code 22314-3109	Purpose of Disbursement CREDIT CARD PROCESSING FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2814.12
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 112 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. CAMPAIGN SOLUTIONS		M M / D D / Y Y Y Y 05 / 02 / 2015
Mailing Address 117 N SAINT ASAPH STREET		Amount of Each Disbursement this Period
City ALEXANDRIA	State VA	Zip Code 22314-3109
Purpose of Disbursement CREDIT CARD PROCESSING FEE		1564.21
Candidate Name		Transaction ID : SB17.I6073
Office Sought:	Disbursement For:	Category/Type
<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)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. CAMPAIGN SOLUTIONS		M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 117 N SAINT ASAPH STREET		Amount of Each Disbursement this Period
City ALEXANDRIA	State VA	Zip Code 22314-3109
Purpose of Disbursement CREDIT CARD PROCESSING FEE		433.11
Candidate Name		Transaction ID : SB17.I6190
Office Sought:	Disbursement For:	Category/Type
<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)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. CAMPAIGN SOLUTIONS		M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address 117 N SAINT ASAPH STREET		Amount of Each Disbursement this Period
City ALEXANDRIA	State VA	Zip Code 22314-3109
Purpose of Disbursement CREDIT CARD PROCESSING FEE		709.67
Candidate Name		Transaction ID : SB17.I6191
Office Sought:	Disbursement For:	Category/Type
<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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2706.99
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 113 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. COURTYARD BY MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2015
Mailing Address 30 EAST HUBBARD		Amount of Each Disbursement this Period 368.23
City CHICAGO	State IL Zip Code 60611	
Purpose of Disbursement CANDIDATE EXPENSE TRAVEL	Category/Type	Transaction ID : SB17.I6076
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:		

Full Name (Last, First, Middle Initial) B. COURTYARD BY MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2015
Mailing Address 30 EAST HUBBARD		Amount of Each Disbursement this Period 3.50
City CHICAGO	State IL Zip Code 60611	
Purpose of Disbursement CANDIDATE EXPENSE TRAVEL	Category/Type	Transaction ID : SB17.I6077
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:		

Full Name (Last, First, Middle Initial) C. CWASL		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2015
Mailing Address 219 N 4TH AVENUE		Amount of Each Disbursement this Period 1000.00
City WAUSAU	State WI Zip Code 54401	
Purpose of Disbursement CONSTITUENT SERVICES	Category/Type	Transaction ID : SB17.I6078
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:		

SUBTOTAL of Disbursements This Page (optional).....	1371.73
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 114 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 3030 N AIRPORT ROAD		Amount of Each Disbursement this Period 467.20
City MANKATO State MN Zip Code 56001-7561	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6079
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 3030 N AIRPORT ROAD		Amount of Each Disbursement this Period 853.60
City MANKATO State MN Zip Code 56001-7561	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6080
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 3030 N AIRPORT ROAD		Amount of Each Disbursement this Period 318.60
City MANKATO State MN Zip Code 56001-7561	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6081
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1639.40
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 115 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 3030 N AIRPORT ROAD		Amount of Each Disbursement this Period 179.50
City MANKATO State MN Zip Code 56001-7561	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6082
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FOUR SEASONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 1 VAIL ROAD		Amount of Each Disbursement this Period 3322.14
City VAIL State CO Zip Code 81657-5701	Purpose of Disbursement EVENT RENTAL & CATERING	
Candidate Name	Category/Type	Transaction ID : SB17.I6084
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN LACROSSE		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2015
Mailing Address 200 PEARL STREET		Amount of Each Disbursement this Period 39.71
City LA CROSSE State WI Zip Code 54602	Purpose of Disbursement STAFF LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.I6087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3541.35
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 116 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. HOLIDAY INN LACROSSE		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2015
Mailing Address 200 PEARL STREET		Amount of Each Disbursement this Period 579.95
City LA CROSSE State WI Zip Code 54602	Category/ Type	
Purpose of Disbursement STAFF LODGING		
Candidate Name		Transaction ID : SB17.I6088
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. HOOKS SOLUTIONS LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 525 6TH STREET		Amount of Each Disbursement this Period 66586.92
City WASHINGTON State DC Zip Code 20003-2706	Category/ Type	
Purpose of Disbursement FUNDRAISING CONSULTING		
Candidate Name		Transaction ID : SB17.I6089
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HOPE LIFE CENTER		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address 605 S 24TH AVE #20		Amount of Each Disbursement this Period 300.00
City WAUSAU State WI Zip Code 54401	Category/ Type	
Purpose of Disbursement TICKET TO EVENT		
Candidate Name		Transaction ID : SB17.I6090
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67466.87
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 117 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 13555 BISHOPS COURT, SUITE #102		Amount of Each Disbursement this Period 66.91
City BROOKFIELD State WI Zip Code 53005-6224	Purpose of Disbursement BANK FEE	
Candidate Name	Category/Type	Transaction ID : SB17.I6091
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. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 13555 BISHOPS COURT, SUITE #102		Amount of Each Disbursement this Period 52.58
City BROOKFIELD State WI Zip Code 53005-6224	Purpose of Disbursement BANK FEE	
Candidate Name	Category/Type	Transaction ID : SB17.I6092
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address 13555 BISHOPS COURT, SUITE #102		Amount of Each Disbursement this Period 44.71
City BROOKFIELD State WI Zip Code 53005-6224	Purpose of Disbursement BANK FEE	
Candidate Name	Category/Type	Transaction ID : SB17.I6093
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	164.20
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 118 OF 136		
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2015
Mailing Address 3908 RIB MOUNTAIN DR		Amount of Each Disbursement this Period 18.22
City WAUSAU State WI Zip Code 54401	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I6098
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2015
Mailing Address 3908 RIB MOUNTAIN DR		Amount of Each Disbursement this Period 38.08
City WAUSAU State WI Zip Code 54401	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I6099
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 3908 RIB MOUNTAIN DR		Amount of Each Disbursement this Period 35.86
City WAUSAU State WI Zip Code 54401	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I6100
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	92.16
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 119 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2015
Mailing Address 3908 RIB MOUNTAIN DR		Amount of Each Disbursement this Period 70.67
City WAUSAU State WI Zip Code 54401	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I6101
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. REPUBLICAN PARTY OF MARATHON COUNTY		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address PO BOX 834		Amount of Each Disbursement this Period 245.00
City WAUSAU State WI Zip Code 54402-0834	Purpose of Disbursement TICKET TO EVENT	
Candidate Name	Category/Type	Transaction ID : SB17.I6095
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. RIVER VALLEY BANK		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 101 SCOTT STREET		Amount of Each Disbursement this Period 5577.51
City WAUSAU State WI Zip Code 54403-4814	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name	Category/Type	Transaction ID : SB17.I6103
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5893.18
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 120 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 4101 RIB MOUNTAIN DRIVE		Amount of Each Disbursement this Period 213.76
City WAUSAU State WI Zip Code 54401-0647	Purpose of Disbursement PHONE BILL	
Candidate Name	Category/Type	Transaction ID : SB17.I6194 [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. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 3030 N AIRPORT ROAD		Amount of Each Disbursement this Period 29.00
City MANKATO State MN Zip Code 56001-7561	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6215 [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) C. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 3030 N AIRPORT ROAD		Amount of Each Disbursement this Period 276.60
City MANKATO State MN Zip Code 56001-7561	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6216 [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:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 121 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. DIAMONDHEAD RESTAU FORT MYERS		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address		Amount of Each Disbursement this Period 233.86
City	State Zip Code	
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type	Transaction ID : SB17.I6217
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address 12455 W CAPITOL DRIVE		Amount of Each Disbursement this Period 37.04
City	State Zip Code	
Purpose of Disbursement SHIPPING	Category/ Type	Transaction ID : SB17.I6219
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 12455 W CAPITOL DRIVE		Amount of Each Disbursement this Period 90.59
City	State Zip Code	
Purpose of Disbursement SHIPPING	Category/ Type	Transaction ID : SB17.I6220
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 122 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial)
A. FOUR SEASONS

Mailing Address 1 VAIL ROAD

City VAIL State CO Zip Code 81657-5701

Purpose of Disbursement
EVENT VENUE & CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 23 / 2015

Amount of Each Disbursement this Period
2000.00

Transaction ID : SB17.I6224

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. THE NEPTUNE INN RICHMOND

Mailing Address 2310 ESTERO BLVD

City FORT MYERS BEACH State FL Zip Code 33931

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 31 / 2015

Amount of Each Disbursement this Period
876.86

Transaction ID : SB17.I6239

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. THE NEPTUNE INN RICHMOND

Mailing Address 2310 ESTERO BLVD

City FORT MYERS BEACH State FL Zip Code 33931

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 31 / 2015

Amount of Each Disbursement this Period
382.93

Transaction ID : SB17.I6240

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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 123 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. THE NEPTUNE INN RICHMOND		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 2310 ESTERO BLVD		Amount of Each Disbursement this Period 382.93
City FORT MYERS BEACH State FL Zip Code 33931	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I6241
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:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. THE NEPTUNE INN RICHMOND		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 2310 ESTERO BLVD		Amount of Each Disbursement this Period 271.93
City FORT MYERS BEACH State FL Zip Code 33931	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I6242
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:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. USAIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 51.00
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I6247
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:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 124 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. USAIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 263.55
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I6248
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. USAIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 25.00
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I6249
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. RIVER VALLEY BANK		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 101 SCOTT STREET		Amount of Each Disbursement this Period 8249.06
City WAUSAU	State WI	
Zip Code 54403-4814	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I6104
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8249.06
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 125 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 4333 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 25.00
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I6192 [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:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 4333 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 75.00
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I6193 [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:	Category/Type	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 4101 RIB MOUNTAIN DRIVE		Amount of Each Disbursement this Period 233.76
City WAUSAU State WI Zip Code 54401-0647	Purpose of Disbursement PHONE BILL	
Candidate Name		Transaction ID : SB17.I6195 [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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 126 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 260.75
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT CATERING	Transaction ID : SB17.I6204 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CVC CATERING 15195506 202-59318		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address		Amount of Each Disbursement this Period 270.00
City	State	
Zip Code	Purpose of Disbursement EVENT CATERING	Transaction ID : SB17.I6208 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 12455 W CAPITOL DRIVE		Amount of Each Disbursement this Period 39.37
City BROOKFIELD	State WI	
Zip Code 53005-2461	Purpose of Disbursement SHIPPING	Transaction ID : SB17.I6221 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 127 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 12455 W CAPITOL DRIVE		Amount of Each Disbursement this Period 37.31
City BROOKFIELD	State WI	
Zip Code 53005-2461	Purpose of Disbursement SHIPPING	Transaction ID : SB17.I6222 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FOUR SEASONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1 VAIL ROAD		Amount of Each Disbursement this Period 3371.97
City VAIL	State CO	
Zip Code 81657-5701	Purpose of Disbursement EVENT VENUE & CATERING	Transaction ID : SB17.I6225 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HERTZ CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address PO BOX 269033 14501 HERTZ QUAIL SPRINGS PARKWAY		Amount of Each Disbursement this Period 1254.62
City OKLAHOMA CITY	State OK	
Zip Code 73126-9033	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I6226 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 128 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. HERTZ CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address PO BOX 269033 14501 HERTZ QUAIL SPRINGS PARKWAY		Amount of Each Disbursement this Period 1052.78
City OKLAHOMA CITY State OK Zip Code 73126-9033	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6227 [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. THE NEPTUNE INN RICHMOND		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 2310 ESTERO BLVD		Amount of Each Disbursement this Period 438.43
City FORT MYERS BEACH State FL Zip Code 33931	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I6243 [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) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address PO BOX 25505		Amount of Each Disbursement this Period 182.94
City LEHIGH VALLEY State PA Zip Code 18002-5505	Purpose of Disbursement WIRELESS SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.I6250 [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:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 129 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. WAGON WHEEL		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 3901 6TH STREET		Amount of Each Disbursement this Period 292.06
City WAUSAU	State WI	
Zip Code 54403	Purpose of Disbursement EVENT CATERING	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WALL STREET JOURNAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address 1350 BROADWAY SUITE 2400		Amount of Each Disbursement this Period 41.81
City NEW YORK	State NY	
Zip Code 10018	Purpose of Disbursement SUBSCRIPTION	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RIVER VALLEY BANK		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 101 SCOTT STREET		Amount of Each Disbursement this Period 792.42
City WAUSAU	State WI	
Zip Code 54403-4814	Purpose of Disbursement CREDIT CARD PAYMENT	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	792.42
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 130 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. STANTON & GREENE		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 319 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 680.00
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT CATERING	Transaction ID : SB17.I6235
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. TRATTORIA ALBERTO		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address 506 8TH STREET		Amount of Each Disbursement this Period 40.00
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEALS	Transaction ID : SB17.I6246
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. WALL STREET JOURNAL		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address 1350 BROADWAY SUITE 2400		Amount of Each Disbursement this Period 41.81
City NEW YORK	State NY	
Zip Code 10018	Purpose of Disbursement SUBSCRIPTION	Transaction ID : SB17.I6210
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 131 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address P.O. BOX 254		Amount of Each Disbursement this Period 7746.28
City DUBLIN	State NH	
Zip Code 03444	Purpose of Disbursement DIRECT MAIL	Transaction ID : SB17.I6106
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SCM ASSOCIATES INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address P.O. BOX 254		Amount of Each Disbursement this Period 16034.81
City DUBLIN	State NH	
Zip Code 03444	Purpose of Disbursement DIRECT MAIL	Transaction ID : SB17.I6107
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SIERRA CLUB		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 50 F STREET NW		Amount of Each Disbursement this Period 1500.00
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I6188
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	25281.09
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 132 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. SUN PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 1800 GRAND AVENUE		Amount of Each Disbursement this Period 5374.37
City WAUSAU State WI Zip Code 54403	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I6109
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. THE VERNON COMPANY		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 604 W 4TH ST. N		Amount of Each Disbursement this Period 2500.00
City NEWTON State IA Zip Code 50208-2046	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I6110
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. THE VERNON COMPANY		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2015
Mailing Address 604 W 4TH ST. N		Amount of Each Disbursement this Period 2500.00
City NEWTON State IA Zip Code 50208-2046	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I6111
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	10374.37
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 133 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. THE VERNON COMPANY		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2015
Mailing Address 604 W 4TH ST. N		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.I6112
City NEWTON	State IA	
Zip Code 50208-2046	Purpose of Disbursement PRINTING	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. THE VERNON COMPANY		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2015
Mailing Address 604 W 4TH ST. N		Amount of Each Disbursement this Period 841.36 Transaction ID : SB17.I6113
City NEWTON	State IA	
Zip Code 50208-2046	Purpose of Disbursement PRINTING	Category/ Type
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:	

Full Name (Last, First, Middle Initial) C. TURTLEBACK GOLF COURSE		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1985 18 1/2 STREET		Amount of Each Disbursement this Period 147.26 Transaction ID : SB17.I6114
City RICE LAKE	State WI	
Zip Code 54868	Purpose of Disbursement EVENT CATERING	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	1688.62
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 134 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. TURTLEBACK GOLF COURSE		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 1985 18 1/2 STREET		Amount of Each Disbursement this Period 979.93
City RICE LAKE State WI Zip Code 54868	Purpose of Disbursement EVENT CATERING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6115
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED STATES FLAG STORE		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address 1000 WESTINGHOUSE DRIVE		Amount of Each Disbursement this Period 456.06
City NEW STANTON State PA Zip Code 15672	Purpose of Disbursement FLAGS	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6120
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2015
Mailing Address 2100 N MOUNTAIN RD		Amount of Each Disbursement this Period 128.00
City WAUSAU State WI Zip Code 54401-8119	Purpose of Disbursement P.O. BOX RENEWAL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6121
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1563.99
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 135 OF 136			
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>05</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		05		2015
M M	/	D D	/	Y Y Y Y								
05		05		2015								
Mailing Address 2100 N MOUNTAIN RD		Amount of Each Disbursement this Period										
City WAUSAU	State WI Zip Code 54401-8119											
Purpose of Disbursement POSTAGE	Category/Type	<table border="1"> <tr> <td>1.47</td> </tr> </table>	1.47									
1.47												
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6122										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>10</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		10		2015
M M	/	D D	/	Y Y Y Y								
06		10		2015								
Mailing Address 2100 N MOUNTAIN RD		Amount of Each Disbursement this Period										
City WAUSAU	State WI Zip Code 54401-8119											
Purpose of Disbursement POSTAGE	Category/Type	<table border="1"> <tr> <td>12.15</td> </tr> </table>	12.15									
12.15												
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6123										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>11</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		11		2015
M M	/	D D	/	Y Y Y Y								
06		11		2015								
Mailing Address 2100 N MOUNTAIN RD		Amount of Each Disbursement this Period										
City WAUSAU	State WI Zip Code 54401-8119											
Purpose of Disbursement POSTAGE	Category/Type	<table border="1"> <tr> <td>8.49</td> </tr> </table>	8.49									
8.49												
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I6124										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>22.11</td> </tr> </table>	22.11
22.11		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 136 OF 136	
	<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)
Duffy for Congress

Full Name (Last, First, Middle Initial) A. VALENTINE DIRECT MARKETING LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 2344 FARRINGTON		Amount of Each Disbursement this Period 4152.25
City DALLAS State TX Zip Code 75207-6014	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I6125
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. VFW DEPT OF WISCONSIN		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 1703 SELBY AVE		Amount of Each Disbursement this Period 260.00
City ST PAUL State MN Zip Code 55104	Purpose of Disbursement CONFERENCE REGISTRATION	
Candidate Name	Category/Type	Transaction ID : SB17.I6126
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. WANNIGAN DAYS PARADE REGISTRATION		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2015
Mailing Address P.O. BOX 337		Amount of Each Disbursement this Period 400.00
City ST CROIX FALLS State WI Zip Code 54024	Purpose of Disbursement PARADE REGISTRATION	
Candidate Name	Category/Type	Transaction ID : SB17.I6127
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4812.25
TOTAL This Period (last page this line number only).....	376949.32