

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Republican Party of Wisconsin

ADDRESS (number and street) 148 East Johnson Street
Check if different than previously reported. (ACC) Madison WI 53703

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00074450 3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2015 through 11 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Hitt, Andrew, , ,
Type or Print Name of Treasurer

Signature of Treasurer Hitt, Andrew, , , [Electronically Filed] Date 05 / 15 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Republican Party of Wisconsin

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="433731.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="248630.07"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="149433.27"/>	<input type="text" value="1854357.44"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="398063.34"/>	<input type="text" value="2288089.38"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="165139.21"/>	<input type="text" value="2055165.25"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="232924.13"/>	<input type="text" value="232924.13"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Republican Party of Wisconsin

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	57358.00	370364.00
(ii) Unitemized	38598.01	888574.26
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	95956.01	1258938.26
(b) Political Party Committees	0.00	46450.00
(c) Other Political Committees (such as PACs).....	6250.00	217472.26
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	102206.01	1522860.52
12. Transfers From Affiliated/Other Party Committees.....	29550.00	98750.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.02	40107.44
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	17677.24	192639.48
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	17677.24	192639.48
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	149433.27	1854357.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	131756.03	1661717.96

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	9943.45	94765.97
(ii) Non-Federal Share.....	17677.24	168472.72
(b) Other Federal Operating Expenditures	39041.21	1094448.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	66661.90	1357687.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	4480.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	9480.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	10098.12
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	98477.31	677899.57
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	98477.31	677899.57
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	165139.21	2055165.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	147461.97	1886692.53

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	102206.01	1522860.52
34. Total Contribution Refunds (from Line 28(d))	0.00	9480.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	102206.01	1513380.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	48984.66	1189214.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.02	40107.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48984.64	1149107.40

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. CHRISTOPH, GERALDINE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 124 OLDE ALLOUEZ COURT

City GREEN BAY	State WI	Zip Code 54301-1971
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2015

Transaction ID : SA11.989056

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CONRADT, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N5057 PULS ROAD

City SHIOCTON	State WI	Zip Code 54170-9058
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2015

Transaction ID : SA11.988918

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PLEVA, ROBERT, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3281 E. THOMPSON AVE

City SAINT FRANCIS	State WI	Zip Code 53235-4921
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLIED INDUSTRIES, INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2015

Transaction ID : SA11.988939

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. TRENT, CARLA, M.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 CHESTNUT HILL COURT
APT 16

City THOUSAND OAKS	State CA	Zip Code 91360-3893
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : SA11.988927

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WIRTH, GUSTAV, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N48 W6100 SPRING STREET

City CEDARBURG	State WI	Zip Code 53012-2437
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELTA SATELLITE COMPANY	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : SA11.989094

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 3451 ROBERTS STREET

City FRANKSVILLE	State WI	Zip Code 53126-9560
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATI	Occupation (for Individual) TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : SA11.989109

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. BURMEISTER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3451 ROBERTS STREET
 City FRANKSVILLE State WI Zip Code 53126-9560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATI Occupation (for Individual) TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2015
Transaction ID : SA11.989110
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. KOHRS, RALPH, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3360 BERMUDA BOULEVARD
 City BROOKFIELD State WI Zip Code 53045-2661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2015
Transaction ID : SA11.989111
 Amount of Each Receipt this Period 150.00
 Memo Item
 CONTRIBUTION

C. NIEMUTH, KEITH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 SILLERWOOD LN
 City NEENAH State WI Zip Code 54956-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOY Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2015
Transaction ID : SA11.990087
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. WALZ, ROBERT, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 530 WINNEBAGO AVE

City PORTAGE	State WI	Zip Code 53901-1232
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CASCADE MOUNTAIN	Occupation (for Individual) SKI AREA OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : SA11.990080

Amount of Each Receipt this Period
105.00

Memo Item
CONTRIBUTION

B. WALZ, ROBERT, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 530 WINNEBAGO AVE

City PORTAGE	State WI	Zip Code 53901-1232
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CASCADE MOUNTAIN	Occupation (for Individual) SKI AREA OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : SA11.990091

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address S67W26030 BENSON AVE

City WAUKESHA	State WI	Zip Code 53189-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MUSKEGO HIGH SCHOOL	Occupation (for Individual) TEACHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2015

Transaction ID : SA11.990082

Amount of Each Receipt this Period
305.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	910.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. SHEVELAND, GORDON, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 4TH AVENUE
 City REDGRANITE State WI Zip Code 54970-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2015
Transaction ID : SA11.989145
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. TORGERSON, D, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1312 WISCONSIN STREET APT 229
 City HUDSON State WI Zip Code 54016-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 05 / 2015
Transaction ID : SA11.989125
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DYKEMA, JOHN, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1535 FOX RIDGE CT
 City DEPERE State WI Zip Code 54115-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SASIB PACKAGING Occupation (for Individual) PLANT MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11000.00

Date of Receipt 11 / 06 / 2015
Transaction ID : SA11.989778
 Amount of Each Receipt this Period 6000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6125.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. FLECKENSTEIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W260 N2914 STEEPLECHASE ROAD**

City PEWAUKEE	State WI	Zip Code 53072-4576
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SYSTEM ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
11 / 09 / 2015

Transaction ID : SA11.989223

Amount of Each Receipt this Period
315.00

Memo Item
CONTRIBUTION

B. HAAG, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4033 WEST CUSTOR AVENUE**

City MILWAUKEE	State WI	Zip Code 53209-4630
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE OIL COMPANY, INC	Occupation (for Individual) OWNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 09 / 2015

Transaction ID : SA11.989240

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. REIMAN, GREG, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5850 N KENT AVE**

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

Name of Employer (for Individual) MILWAUKEE COUNTY DEPARTMENT ON AGING	Occupation (for Individual) MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 09 / 2015

Transaction ID : SA11.989789

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1815.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. BUCHHOLZ, DONALD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 HIGHVIEW ROAD
 City ELLISON BAY State WI Zip Code 54210-9721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 10 / 2015
Transaction ID : SA11.989302
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. GUTSCHENRITTER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N3844 GOODLAND ROAD
 City RUBICON State WI Zip Code 53078-9505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUTSCHENRITTER WELDING Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 10 / 2015
Transaction ID : SA11.989281
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HARTUNG, CHERYL, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2148 HILLENBRAND DRIVE
 City CROSS PLAINS State WI Zip Code 53528-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 21ST CENTURY ESCHOOL Occupation (for Individual) LEARNING COACH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 10 / 2015
Transaction ID : SA11.989296
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. OGLE, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W11104 COUNTY ROAD M
 City MEDFORD State WI Zip Code 54451-8982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 10 / 2015
Transaction ID : SA11.989321
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CURRY, WILLIAM, C., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2113 MONROE STREET
 City NEW HOLSTEIN State WI Zip Code 53061-1103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.J. MEISELWITZ FURNITURE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 11 / 2015
Transaction ID : SA11.989326
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MAIER, LOUIS, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9862 N. RANGE LINE ROAD
 City MEQUON State WI Zip Code 53092-5606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 11 / 2015
Transaction ID : SA11.989325
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. PSYHOGIOS, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6228 BRAEBURN CIRCLE
 City EDINA State MN Zip Code 55439-2548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GERITOM MEDICAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 11 / 2015
Transaction ID : SA11.989328
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HENDRICKS, DIANE, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE ABC PARKWAY
 City BELOIT State WI Zip Code 53511-4466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABC SUPPLY COMPANY, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 12 / 2015
Transaction ID : SA11.989329
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. CONGDON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 N BROOKFIELD ROAD APT 218
 City BROOKFIELD State WI Zip Code 53045-5839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989444
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11030.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. COWAN, KAREN, E.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 877 S 16TH CT
 B 4
 City STURGEON BAY State WI Zip Code 54235-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11.989385
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

B. DAHLIN, BERNARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2670 GOOD SHEPHERD LANE
 City GREEN BAY State WI Zip Code 54313-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11.989360
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. DEBROUX, RUTH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1940 WOODSIDE LN
 City RICHFIELD State WI Zip Code 53076-9793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11.989332
 Amount of Each Receipt this Period
 80.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. FIELD, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1550 WISCONSIN DELLS PARKWAY
 City WISCONSIN DELLS State WI Zip Code 53965-8446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELLS DUCK TOURS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989440
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HANLEY, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N2752 SUMMERVILLE PARK ROAD
 City LODI State WI Zip Code 53555-9642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989403
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KERNS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2182 COUNTY ROAD MM
 City OREGON State WI Zip Code 53575-2122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCKY'S PORTABLE TOILETS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989445
 Amount of Each Receipt this Period 175.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. LEEDLE, JACKIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **N474 ARMSBY ROAD**
 City **LAKE GENEVA** State **WI** Zip Code **53147-4219**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **FARMER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **11 / 13 / 2015**
Transaction ID : SA11.989341
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

B. RADUE, JANET, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **1102 FROST ROAD**
 City **HOWARDS GROVE** State **WI** Zip Code **53083-1371**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **BITTER NEUMANN APPLIANCE TV FURNITUR** Occupation (for Individual) **MANAGER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 13 / 2015**
Transaction ID : SA11.989394
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

C. ROGAN, JOHN, F., COL,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **6640 BOULDER LANE**
 City **MIDDLETON** State **WI** Zip Code **53562-2807**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **11 / 13 / 2015**
Transaction ID : SA11.989418
 Amount of Each Receipt this Period **40.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. SCHICK, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 S LAUREL DRIVE
 City NEW BERLIN State WI Zip Code 53151-4220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHLOUGH, STUART, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1655 CONNORS ROAD
 City MARSHALL State WI Zip Code 53559-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989357
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHWARTZ, WALTER, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8220 HARWOOD AVENUE # 338
 City WAUWATOSA State WI Zip Code 53213-2580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 11 / 13 / 2015
Transaction ID : SA11.989345
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. ULIK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9969 S 60TH STREET
 City FRANKLIN State WI Zip Code 53132-8824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STU'S FLOORING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11.989439
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. WAGNER, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W3445 CRESTWOOD DRIVE
 City WHITEWATER State WI Zip Code 53190-3007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11.989402
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. ZUBE, ZEVIAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 CEDAR RIDGE DRIVE APT S 301 APT S 301
 City WEST BEND State WI Zip Code 53095-3667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : SA11.989355
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. ALFONSO, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6402 SHARPSBURG DRIVE

City MADISON	State WI	Zip Code 53718-3160
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

Transaction ID : SA11.989600

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DARWIN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 S FRANKLIN ST

City WHITEWATER	State WI	Zip Code 53190-2202
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

Transaction ID : SA11.989745

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 314 EMILY LN

City BEAVER DAM	State WI	Zip Code 53916-1990
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

Transaction ID : SA11.989748

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. HASKINS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 861 HAWTHORNE CIRCLE
 City LOMBARD State IL Zip Code 60148-3636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2015
Transaction ID : SA11.989797
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, JAMES, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 W WILSON ST UNIT 5
 City MADISON State WI Zip Code 53703-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2015
Transaction ID : SA11.989530
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PEARSON, JOHN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 PINE ST.
 City RYE State NH Zip Code 03870-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2015
Transaction ID : SA11.989529
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. PECK JR., JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 829

City RANCHO SANTA FE	State CA	Zip Code 92067-0829
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) PECK ENTERPRISES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		17		2015

Transaction ID : SA11.989779

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. POYA, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16851 HARLEM AVENUE APT 236

City TINLEY PARK	State IL	Zip Code 60477-2736
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		17		2015

Transaction ID : SA11.989560

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SCHMUCK, CARL, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4417 OAKWOOD HILLS PARKWAY

City EAU CLAIRE	State WI	Zip Code 54701-7794
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		17		2015

Transaction ID : SA11.989584

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. SOMERS, JOSEPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5458 OLD HIGHWAY 18
 City STEVENS POINT State WI Zip Code 54482-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LANDSCAPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2015
Transaction ID : SA11.989643
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. WUESTHOFF, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10737 N ESSEX COURT
 City MEQUON State WI Zip Code 53092-8531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2015
Transaction ID : SA11.989597
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SYNNESTVEDT, ANNE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 550
 City BRYN ATHYN State PA Zip Code 19009-0550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2015
Transaction ID : SA11.990200
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. TRENT, CARLA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 CHESTNUT HILL COURT
 APT 16
 City THOUSAND OAKS State CA Zip Code 91360-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 18 / 2015
Transaction ID : SA11.990199
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EASTON, VIRGINIA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 IRVINE BOULEVARD, SPACE 194
 City IRVINE State CA Zip Code 92620-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 19 / 2015
Transaction ID : SA11.990220
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHANSON, MARTIN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 EAST AVENUE
 City PARK RIDGE State IL Zip Code 60068-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 19 / 2015
Transaction ID : SA11.990215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. NORDSTROM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 377
 City EGG HARBOR State WI Zip Code 54209-0377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 19 / 2015
Transaction ID : SA11.990271
 Amount of Each Receipt this Period 175.00
 Memo Item CONTRIBUTION

B. AUGUSTINE, KAY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7934 W KATHRYN AVENUE
 City MILWAUKEE State WI Zip Code 53218-3726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PIANO TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 20 / 2015
Transaction ID : SA11.990304
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. HAYS, THOMAS, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WYNMERE ROAD
 City WYNNEWOOD State PA Zip Code 19096-1308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAYS CORPORATION Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 20 / 2015
Transaction ID : SA11.990311
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. LEVIN, HERBERT, ALAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 E GRINNELL DRIVE
 City BURBANK State CA Zip Code 91501-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOJ OF CA Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 995.00

Date of Receipt 11 / 20 / 2015
Transaction ID : SA11.991176
 Amount of Each Receipt this Period 95.00
 Memo Item CONTRIBUTION

B. PARENT, JEANINE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 MAPLEWOOD COURT APT 14
 City ARCADIA State WI Zip Code 54612-1530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) SENIORS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 20 / 2015
Transaction ID : SA11.990288
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. WOLF, DEAN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3108 CAMINO DE LA SIERRA NE
 City ALBUQUERQUE State NM Zip Code 87111-5604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LZ TECHNOLOGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 20 / 2015
Transaction ID : SA11.991175
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. SARTELL, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 266

City JANESVILLE	State WI	Zip Code 53547-0266
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SARTELL INTERNATIONAL PUBLICAITONS	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : SA11.990707

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STOVER, RUTH, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 WOOD DALE RD

City CHESTER	State VA	Zip Code 23831-2048
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : SA11.990692

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CERVIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815A HILLTOP AVENUE EXTENTION

City ABINGDON	State MD	Zip Code 21009-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 11 / 24 / 2015
Transaction ID : SA11.991181

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. DORMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 MONTEREY BLVD
 City BROOKFIELD State WI Zip Code 53005-3741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMALGA COMPOSTIES INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.991153
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. HUTH, MIRIAM, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 475 - 4TH FARIWAY DRIVE
 City ROSWELL State GA Zip Code 30076-3565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990387
 Amount of Each Receipt this Period 260.00
 Memo Item
CONTRIBUTION

C. LAMPE, RONALD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 PANTHER TRAIL
 City MONONA State WI Zip Code 53716-3071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990424
 Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	960.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 107
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. MCKISSACK, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BITTERROOT LN
 City SAVANNAH State GA Zip Code 31419-9507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULFSTREAM AEROSPACE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990402
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOLLINO, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 N BAY AVENUE
 City MASSAPEQUA State NY Zip Code 11758-2046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990354
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. NISSLEY, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 OENOKE LANE
 City NEW CANAAN State CT Zip Code 06840-4515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990413
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. PETERSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4173 S SONATA CIR
 City MILWAUKEE State WI Zip Code 53221-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.991204
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. PRITZLAFF, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 E OAK HILLS DRIVE
 City CASTLE ROCK State CO Zip Code 80108-9241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.991188
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. REMINGTON, JAMES, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 CEDARFIELD PKWY. APT. 263
 City HENRICO State VA Zip Code 23233-1942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990395
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 405.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. SCHMITZ, DAVID, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W7246 SUNSET LANE
 City SPOONER State WI Zip Code 54801-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHUEPERT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 467
 City SISTER BAY State WI Zip Code 54234-0467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990371
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TRONNIER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 SUMMER LN
 City SPARTA State WI Zip Code 54656-1053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) CIVIL SERVICE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990438
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. VANGSNESS, MAE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 W DEAN ROAD
 City MILWAUKEE State WI Zip Code 53223-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 24 / 2015
Transaction ID : SA11.990441
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CLAIBORNE, WALTER, H., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14217 CLAIBORNE ROAD
 City BATCHELOR State LA Zip Code 70715-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1645.00

Date of Receipt 11 / 25 / 2015
Transaction ID : SA11.990660
 Amount of Each Receipt this Period 220.00
 Memo Item CONTRIBUTION

C. ASPENSON, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 MASON STREET NW APT 316
 City ONALASKA State WI Zip Code 54650-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1210.00

Date of Receipt 11 / 30 / 2015
Transaction ID : SA11.990514
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. BARTH, STEVEN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 EAST WISCONSIN AVEUNE 3700

City MILWAUKEE	State WI	Zip Code 53202-5300
-------------------	-------------	------------------------

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

Name of Employer (for Individual) FOLEY & LARDNER	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : SA11.991050

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. BLUEMKE, DUANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 SEA GULL AVENUE

City VERO BEACH	State FL	Zip Code 32960-4258
--------------------	-------------	------------------------

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

Name of Employer (for Individual) U. S. COUNSELING SERVICES	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : SA11.990520

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. BOWMAN, ANN, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD

City HERBSTER	State WI	Zip Code 54844-4450
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : SA11.990518

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. COOMBES, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 744 ELM GROVE ROAD

City ELM GROVE	State WI	Zip Code 53122-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11.990538

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GREAVES, WILLIAM, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8851 N BAYSIDE DR

City BAYSIDE	State WI	Zip Code 53217-1910
-----------------	-------------	------------------------

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

Name of Employer (for Individual) ABPIN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11.990526

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. JONAS, GLENN, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1903 GRANVILLE ROAD

City CEDARBURG	State WI	Zip Code 53012-9739
-------------------	-------------	------------------------

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

Name of Employer (for Individual) R.F. TECHNOLOGIES INC.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11.991049

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHROEDER, MARK, , ,

Mailing Address **513 WASHINGTON STREET**

City ATHENS	State WI	Zip Code 54411-9757
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) SCHOOL DISTRICT OF ATHENS	Occupation (for Individual) MUSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2015

Transaction ID : SA11.990536

Amount of Each Receipt this Period

68.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

--

Memo Item

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

--

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	68.00
TOTAL This Period (last page this line number only).....▶	57358.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 107
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. RIBBLE FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 7200

City APPLETON	State WI	Zip Code 54912-7069
FEC ID number of contributing federal political committee. C C00463620		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
11 / 03 / 2015
Transaction ID : SA11.989104

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ARDA ROC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1202 15TH ST NW STE 400

City WASHINGTON	State DC	Zip Code 20005-
FEC ID number of contributing federal political committee. C C90014036		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Date of Receipt
MM / DD / YYYY
11 / 13 / 2015
Transaction ID : SA11.991048

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

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

City	State	Zip Code
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	6250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 107
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 310 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-1885
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
139700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2015

Transaction ID : SA11.991047

Amount of Each Receipt this Period
29550.00

Memo Item
TRANSFER

B.

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	29550.00
TOTAL This Period (last page this line number only).....	29550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 107
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. ACCOUNTANTS WORLD PAYROLL LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 FELL COURT

City HAUPPAUGE	State NY	Zip Code 11788-4379
-------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.99

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2015

Transaction ID : SA11.991291

Amount of Each Receipt this Period

0.02

Memo Item
REFUND

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

--

Memo Item

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

--

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.02
TOTAL This Period (last page this line number only).....▶	0.02

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BMO HARRIS BANK

Mailing Address P.O. BOX 3052

City
MILWAUKEE

State
WI

Zip Code
53201

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

FEC Identification Number

C []

Transaction ID : SB21B.I2271I

Amount of Each Disbursement this Period

[] 6703.78

Memo Item

Full Name (Last, First, Middle Initial)

B. ADOBE SYSTEMS

Mailing Address 801 N 34TH STREET

City
SEATTLE

State
WA

Zip Code
98103

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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
09			16			2015			

FEC Identification Number

C []

Transaction ID : SB21B.I2284I

Amount of Each Disbursement this Period

[] 52.74

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address

1593 SPRING HILL ROAD

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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
09			21			2015			

FEC Identification Number

C []

Transaction ID : SB21B.I2284I

Amount of Each Disbursement this Period

[] 902.50

Memo Item

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

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

[] 6703.78

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. DOMAIN/HOSTING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2015

Mailing Address 14455 N HAYDEN ROAD
SUITE 219

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
DOMAIN HOSTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2284
Amount of Each Disbursement this Period

[REDACTED] 79.99

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2015

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ADVERTISING EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2284
Amount of Each Disbursement this Period

[REDACTED] 750.11

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2015

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ADVERTISING EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2284
Amount of Each Disbursement this Period

[REDACTED] 750.02

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ADVERTISING EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2285I
Amount of Each Disbursement this Period
508.28

Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2284I
Amount of Each Disbursement this Period
25.16

Memo Item

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2284I
Amount of Each Disbursement this Period
6.99

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2285
Amount of Each Disbursement this Period
8.99

Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2285
Amount of Each Disbursement this Period
25.16

Memo Item

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address 1 MICROSOFT WAY

City REDMOND State WA Zip Code 98052

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2284
Amount of Each Disbursement this Period
158.84

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. MICROSOFT

Mailing Address 1 MICROSOFT WAY

City REDMOND State WA Zip Code 98052

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2284!
 Amount of Each Disbursement this Period
 26.38

Memo Item

Full Name (Last, First, Middle Initial)

B. RALLYCONGRESS.COM

Mailing Address 2200 WILSON BLVD. #102-299

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement DOMAIN HOSTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2284!
 Amount of Each Disbursement this Period
 249.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALLYCONGRESS.COM

Mailing Address 2200 WILSON BLVD. #102-299

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement DOMAIN HOSTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2285
 Amount of Each Disbursement this Period
 249.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. SAFESoft SOLUTIONS

Mailing Address 20950 WARNER CENTER LANE

City
WOODLAND

State
CA

Zip Code
91367

Purpose of Disbursement
PREDICTIVE DIALER

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2015			

FEC Identification Number

C []
Transaction ID : SB21B.I2285
Amount of Each Disbursement this Period
[] 2030.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VERTICAL RESPONSE

Mailing Address 50 BEALE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94105

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.I2285
Amount of Each Disbursement this Period
[] 749.99

Memo Item

Full Name (Last, First, Middle Initial)

C. BMO HARRIS BANK

Mailing Address P.O. BOX 3052

City
MILWAUKEE

State
WI

Zip Code
53201

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

FEC Identification Number

C []
Transaction ID : SB21B.I2271
Amount of Each Disbursement this Period
[] 67.32

Memo Item

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

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

67.32

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2271
Amount of Each Disbursement this Period
1.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2271
Amount of Each Disbursement this Period
10.80

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2271
Amount of Each Disbursement this Period
55.20

Memo Item

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

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

67.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BMO HARRIS BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2015

Mailing Address 770 N WATER STREET

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.I2270**
Amount of Each Disbursement this Period

[REDACTED] 244.16

Memo Item

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement
BANK FEE

[REDACTED]

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. PIRYX

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2015

Mailing Address 85 NATOMA STREET

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.I2272C**
Amount of Each Disbursement this Period

[REDACTED] 13.80

Memo Item

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

[REDACTED]

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. PIRYX

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		06		2015

Mailing Address 85 NATOMA STREET

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.I2272**
Amount of Each Disbursement this Period

[REDACTED] 241.00

Memo Item

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

[REDACTED]

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

[REDACTED] 498.96

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2271
Amount of Each Disbursement this Period
7.95

Memo Item

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2272
Amount of Each Disbursement this Period
21.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BANCARD/FIS MERCHANT SERVICES

Mailing Address 11000 W LAKE PARK DRIVE

City MILWAUKEE State WI Zip Code 53224

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2271
Amount of Each Disbursement this Period
846.21

Memo Item

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

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

875.16

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. FED EX

Mailing Address P.O. BOX 94515

City
PALATINE

State
IL

Zip Code
60094

Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2015			

FEC Identification Number

C []

Transaction ID : SB21B.I2274

Amount of Each Disbursement this Period

[] 152.34

Memo Item

Full Name (Last, First, Middle Initial)

B. MAJORITY STRATEGIES

Mailing Address 12854 KENAN DRIVE

City
JACKSONVILLE

State
FL

Zip Code
32258

Purpose of Disbursement
DIGITAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2015			

FEC Identification Number

C []

Transaction ID : SB21B.I2273

Amount of Each Disbursement this Period

[] 2275.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City
SAN FRANCISCO

State
CA

Zip Code
94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2015			

FEC Identification Number

C []

Transaction ID : SB21B.I2272

Amount of Each Disbursement this Period

[] 3.20

Memo Item

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

[] 2430.54

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2272

Amount of Each Disbursement this Period

[REDACTED] 6.80

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 12 / 2015

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I22713

Amount of Each Disbursement this Period

[REDACTED] 13.66

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 12 / 2015

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2272

Amount of Each Disbursement this Period

[REDACTED] 4.00

Memo Item

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

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

[REDACTED] 24.46

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. BMO HARRIS BANK

Full Name (Last, First, Middle Initial)

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB21B.I2270i

Amount of Each Disbursement this Period: 184.89

Memo Item

B. BMO HARRIS BANK

Full Name (Last, First, Middle Initial)

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB21B.I2270i

Amount of Each Disbursement this Period: 12.00

Memo Item

C. PIRYX

Full Name (Last, First, Middle Initial)

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB21B.I2272i

Amount of Each Disbursement this Period: 6.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 202.89

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. THE TARRANCE GROUP, INC.

Mailing Address 201 NORTH UNION STREET

City
ALEXANDRIA

State
VA

Zip Code
22314-2649

Purpose of Disbursement
POLLING

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
11			13			2015			

FEC Identification Number

C []
Transaction ID : SB21B.I2274'
Amount of Each Disbursement this Period
[] 18049.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVENUE SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
FUNDRAISING - NOT FEA

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2015			

FEC Identification Number

C []
Transaction ID : SB21B.I2274C
Amount of Each Disbursement this Period
[] 5320.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICA RISING, LLC

Mailing Address 1555 WILSON BOULEVARD

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
RESEARCH SERVICES

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
11			17			2015			

FEC Identification Number

C []
Transaction ID : SB21B.I2274
Amount of Each Disbursement this Period
[] 3000.00

Memo Item

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

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

[] 26369.00

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2272
Amount of Each Disbursement this Period

[REDACTED] 421.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VILLAGE GRAPHICS PRINTING, LLC

Mailing Address 108 W CAPITOL DRIVE

City HARTLAND State WI Zip Code 53029

Purpose of Disbursement
PRINTING - NOT FEA

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2274
Amount of Each Disbursement this Period

[REDACTED] 10.51

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2015			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2272
Amount of Each Disbursement this Period

[REDACTED] 7.40

Memo Item

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

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

[REDACTED] 438.91

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I2272!

Amount of Each Disbursement this Period

23.20

Memo Item

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I2273C

Amount of Each Disbursement this Period

29.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I2273

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

552.20

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273
Amount of Each Disbursement this Period
22.20

Memo Item

Full Name (Last, First, Middle Initial)

B. FED EX

Mailing Address P.O. BOX 94515

City PALATINE State IL Zip Code 60094

Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 24 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I22745
Amount of Each Disbursement this Period
156.29

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273
Amount of Each Disbursement this Period
2.00

Memo Item

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

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

180.49

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273
Amount of Each Disbursement this Period
29.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273
Amount of Each Disbursement this Period
29.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273
Amount of Each Disbursement this Period
150.00

Memo Item

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

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

208.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273i
Amount of Each Disbursement this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

FEC Identification Number

C
Transaction ID : SB21B.I2273i
Amount of Each Disbursement this Period
12.60

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

312.60

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

38931.31

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. AMERICAN FUNDS SERVICE COMPANY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2015					

Mailing Address BOX 6164

City INDIANAPOLIS State IN Zip Code 46206-6164

Purpose of Disbursement
EMPLOYEE SIMPLE IRA

FEC Identification Number

C
Transaction ID : SB30B.I2275I
Amount of Each Disbursement this Period

Candidate Name

Category/Type

264.34

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. AMERICAN FUNDS SERVICE COMPANY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2015					

Mailing Address BOX 6164

City INDIANAPOLIS State IN Zip Code 46206-6164

Purpose of Disbursement
EMPLOYEE SIMPLE IRA

FEC Identification Number

C
Transaction ID : SB30B.I2275I
Amount of Each Disbursement this Period

Candidate Name

Category/Type

230.55

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. DELTA DENTAL

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2015					

Mailing Address P.O. BOX 828

City STEVENS POINT State WI Zip Code 54481

Purpose of Disbursement
DENTAL INSURANCE

FEC Identification Number

C
Transaction ID : SB30B.I2276
Amount of Each Disbursement this Period

Candidate Name

Category/Type

313.46

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

808.35

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. ASSURANT EMPLOYEE BENEFITS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 807009

City KANSAS CITY State MO Zip Code 64184

Purpose of Disbursement EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2276

Amount of Each Disbursement this Period: 334.20

Memo Item

B. BARNWELL-HAYEMEYER, FORREST, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1105 W OUTER DRIVE

City OAK RIDGE State TN Zip Code 37830

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2276

Amount of Each Disbursement this Period: 1167.13

Memo Item

C. BARNWELL-HAYEMEYER, FORREST, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1105 W OUTER DRIVE

City OAK RIDGE State TN Zip Code 37830

Purpose of Disbursement EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2276

Amount of Each Disbursement this Period: 206.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1708.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB30B.I2285!**
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. BREDEMUS, DAVID, , ,

Mailing Address 827 N 11TH STREET

City State Zip Code
MILWAUKEE WI 53233

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB30B.I2277?**
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CRAVEN, STEVEN, , ,

Mailing Address 401 N WASHINGTON STREET

City State Zip Code
GREEN BAY WI 54301

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB30B.I2277**
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. CURRY, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 13 / 2015

Mailing Address 131 W SILVER SPRING DRIVE

City WHITEFISH BAY State WI Zip Code 53217

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C [REDACTED]
Transaction ID : SB30B.I2277
Amount of Each Disbursement this Period: 1263.65

Memo Item

B. DAHMS, DANA, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 13 / 2015

Mailing Address 924 TENNY AVENUE

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C [REDACTED]
Transaction ID : SB30B.I2277
Amount of Each Disbursement this Period: 211.94

Memo Item

C. DICKIE, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 13 / 2015

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C [REDACTED]
Transaction ID : SB30B.I2278
Amount of Each Disbursement this Period: 1205.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2680.95

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. DILLON, CATHERINE, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 3612 CALVEND LANE		FEC Identification Number C	
City KENSINGTON	State MD	Zip Code 20895	Transaction ID : SB30B.I2278
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 194.87
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. DUFFEY, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 726 WINDSOR COURT		FEC Identification Number C	
City WAUWATOSA	State WI	Zip Code 53226	Transaction ID : SB30B.I2278
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 3161.25
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. DUFFEY, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 726 WINDSOR COURT		FEC Identification Number C	
City WAUWATOSA	State WI	Zip Code 53226	Transaction ID : SB30B.I2278
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 6404.77
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	9760.89
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. FOSTER, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2279

Amount of Each Disbursement this Period: 766.47

Memo Item

B. GARRETT, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11507 BROOKSHIRE DR.

City ORLAND PARK State IL Zip Code 60467

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2279

Amount of Each Disbursement this Period: 1635.15

Memo Item

C. GARRETT, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11507 BROOKSHIRE DR.

City ORLAND PARK State IL Zip Code 60467

Purpose of Disbursement EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2279

Amount of Each Disbursement this Period: 1073.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3474.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2015			

FEC Identification Number

C [REDACTED]
Transaction ID : SB30B.I2286'
Amount of Each Disbursement this Period
[REDACTED] 488.76

Memo Item

Full Name (Last, First, Middle Initial)

B. UHAUL

Mailing Address 1925 E MAIN STREET

City State Zip Code
WAUKESHA WI 53186

Purpose of Disbursement
MOVING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]
Transaction ID : SB30B.I22864
Amount of Each Disbursement this Period
[REDACTED] 238.05

Memo Item

Full Name (Last, First, Middle Initial)

C. GEHL, PATRICK, , ,

Mailing Address 1179 COLUMBUS CIRCLE

City State Zip Code
JANESVILLE WI 53545

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2015			

FEC Identification Number

C [REDACTED]
Transaction ID : SB30B.I2279
Amount of Each Disbursement this Period
[REDACTED] 881.58

Memo Item

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

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

[REDACTED]	881.58
------------	--------

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. GEHL, PATRICK, , ,

Mailing Address 1179 COLUMBUS CIRCLE

City
JANESVILLE

State
WI

Zip Code
53545

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2279I

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. GRAVLEE, MARTHA, , ,

Mailing Address 2907 BIG TIMBER CIRCLE

City
SUAMICO

State
WI

Zip Code
54313

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2280C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. HEATH, BENJAMIN, , ,

Mailing Address 514 E WASHINGTON AVENUE

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2280C

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. HEIMBACH, DONNA, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 3002 DIANNE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280 Amount of Each Disbursement this Period 598.69	
City MIDDLETON	State WI	Zip Code 53562	Category/ Type
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
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. HUFFMAN, CARLTON, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 2279 W PERSHING STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280 Amount of Each Disbursement this Period 1116.21	
City APPLETON	State WI	Zip Code 54914	Category/ Type
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
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. HUFFMAN, CARLTON, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 2279 W PERSHING STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280 Amount of Each Disbursement this Period 77.49	
City APPLETON	State WI	Zip Code 54914	Category/ Type
Purpose of Disbursement EXPENSE REIMBURSEMENT			
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	1792.39
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2286;
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KAPLA, PATRICK, , ,

Mailing Address 5126 FOUSER FARM ROAD

City State Zip Code
EAU CLAIRE WI 54701

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2281C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. LEONE, ANNA, , ,

Mailing Address 801 W JOHNSON STREET

City State Zip Code
MADISON WI 53706

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2281
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. LOOMIS, LARRY, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 762 BRIAR LN		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2281 Amount of Each Disbursement this Period 428.29	
City BELOIT	State WI	Zip Code 53511	Category/ Type
Purpose of Disbursement PAYROLL		Memo Item <input type="checkbox"/>	
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. POOLE, SCOTT, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 1528 SELLERY STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2281 Amount of Each Disbursement this Period 364.73	
City MIDDLETON	State WI	Zip Code 53562	Category/ Type
Purpose of Disbursement PAYROLL		Memo Item <input type="checkbox"/>	
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. RECTOR, JASON, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015	
Mailing Address 1902 40TH AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2281 Amount of Each Disbursement this Period 1236.68	
City OSCEOLA	State WI	Zip Code 54020	Category/ Type
Purpose of Disbursement PAYROLL		Memo Item <input type="checkbox"/>	
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)..... ▶

2029.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. RIPKEY, HANNAH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1021 TARRANT DRIVE

City FONTANA State WI Zip Code 53125

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2282I

Amount of Each Disbursement this Period: 180.05

Memo Item

B. SAPP, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2282I

Amount of Each Disbursement this Period: 1608.51

Memo Item

C. SEXAUER, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9023 COTSWALD WAY

City NEW PORT RICHEY State FL Zip Code 34655

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2282I

Amount of Each Disbursement this Period: 1141.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2929.76

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. STOLTE, CARL, , ,

Mailing Address 3519 ROMA LANE

City
MIDDLETON

State
WI

Zip Code
53562

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2015			

FEC Identification Number

C

Transaction ID : SB30B.I2283I

Amount of Each Disbursement this Period

161.48

Memo Item

Full Name (Last, First, Middle Initial)

B. WILSON, JOSHUA, , ,

Mailing Address 641 W. MAIN STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2015			

FEC Identification Number

C

Transaction ID : SB30B.I2283I

Amount of Each Disbursement this Period

404.95

Memo Item

Full Name (Last, First, Middle Initial)

C. ZDROIK, JOSHUA, , ,

Mailing Address 756 BUS LANE

City
STEVENS POINT

State
WI

Zip Code
54482

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2015			

FEC Identification Number

C

Transaction ID : SB30B.I2283I

Amount of Each Disbursement this Period

1143.03

Memo Item

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

1709.46

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. ZDROIK, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 756 BUS LANE

City STEVENS POINT State WI Zip Code 54482

Purpose of Disbursement EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2283!

Amount of Each Disbursement this Period: 199.50

Memo Item

B. MILEAGE

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement MILEAGE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2286!

Amount of Each Disbursement this Period: 175.50

Memo Item

C. ACCOUNTANTS WORLD PAYROLL LLC

Full Name (Last, First, Middle Initial)

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2274

Amount of Each Disbursement this Period: 56.14

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 255.64

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	3		2	0	1	5		

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2274;
Amount of Each Disbursement this Period

[REDACTED] 10.83

Candidate Name

Category/
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

B. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	3		2	0	1	5		

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2274;
Amount of Each Disbursement this Period

[REDACTED] 59.94

Candidate Name

Category/
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

C. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	3		2	0	1	5		

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2274;
Amount of Each Disbursement this Period

[REDACTED] 79.00

Candidate Name

Category/
Type

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

Memo Item

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

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

[REDACTED] 149.77

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. EMPLOYEE BENEFITS CORPORATION

Mailing Address P.O. BOX 44347

City MADISON State WI Zip Code 53744-4347

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 19 / 2015

FEC Identification Number
C
Transaction ID : SB30B.I2276i
Amount of Each Disbursement this Period
760.74

Memo Item

Full Name (Last, First, Middle Initial)
B. AMERICAN FUNDS SERVICE COMPANY

Mailing Address BOX 6164

City INDIANAPOLIS State IN Zip Code 46206-6164

Purpose of Disbursement
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 20 / 2015

FEC Identification Number
C
Transaction ID : SB30B.I2275e
Amount of Each Disbursement this Period
175.00

Memo Item

Full Name (Last, First, Middle Initial)
C. AMERICAN FUNDS SERVICE COMPANY

Mailing Address BOX 6164

City INDIANAPOLIS State IN Zip Code 46206-6164

Purpose of Disbursement
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 20 / 2015

FEC Identification Number
C
Transaction ID : SB30B.I2276
Amount of Each Disbursement this Period
1079.97

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2015.71

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ASSURANT EMPLOYEE BENEFITS

Mailing Address P.O. BOX 807009

City KANSAS CITY State MO Zip Code 64184

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 24 / 2015

FEC Identification Number

C
Transaction ID : SB30B.I2276;
Amount of Each Disbursement this Period
210.27

Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA DENTAL

Mailing Address P.O. BOX 828

City STEVENS POINT State WI Zip Code 54481

Purpose of Disbursement
DENTAL INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 24 / 2015

FEC Identification Number

C
Transaction ID : SB30B.I22764
Amount of Each Disbursement this Period
313.46

Memo Item

Full Name (Last, First, Middle Initial)

C. BARNWELL-HAYEMEYER, FORREST, , ,

Mailing Address 1105 W OUTER DRIVE

City OAK RIDGE State TN Zip Code 37830

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

FEC Identification Number

C
Transaction ID : SB30B.I2277
Amount of Each Disbursement this Period
1167.15

Memo Item

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

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

1690.88

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. BARNWELL-HAYEMEYER, FORREST, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1105 W OUTER DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2277' Amount of Each Disbursement this Period [REDACTED] 240.23	
City OAK RIDGE	State TN	Zip Code 37830	Category/ Type [REDACTED]
Purpose of Disbursement EXPENSE REIMBURSEMENT		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 <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MILEAGE		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2287z Amount of Each Disbursement this Period [REDACTED] 205.23	
City	State	Zip Code	Category/ Type [REDACTED]
Purpose of Disbursement MILEAGE EXPENSE		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 <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. BREDEMUS, DAVID, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 827 N 11TH STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2277 Amount of Each Disbursement this Period [REDACTED] 1117.14	
City MILWAUKEE	State WI	Zip Code 53233	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1357.37
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. CRAVEN, STEVEN, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 401 N WASHINGTON STREET		FEC Identification Number C [] Transaction ID : SB30B.I2277! Amount of Each Disbursement this Period [] 886.09	
City GREEN BAY	State WI	Zip Code 54301	Category/ Type []
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. CRAVEN, STEVEN, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 401 N WASHINGTON STREET		FEC Identification Number C [] Transaction ID : SB30B.I2277! Amount of Each Disbursement this Period [] 247.67	
City GREEN BAY	State WI	Zip Code 54301	Category/ Type []
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. CURRY, PHILIP, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 131 W SILVER SPRING DRIVE		FEC Identification Number C [] Transaction ID : SB30B.I2277! Amount of Each Disbursement this Period [] 1263.65	
City WHITEFISH BAY	State WI	Zip Code 53217	Category/ Type []
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2397.41
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. DAHMS, DANA, , ,

Mailing Address 924 TENNY AVENUE

City
WAUKESHA

State
WI

Zip Code
53186

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

FEC Identification Number

C []
Transaction ID : SB30B.I2278I
Amount of Each Disbursement this Period
[] 199.48

Memo Item

Full Name (Last, First, Middle Initial)

B. DICKIE, RICHARD, , ,

Mailing Address 126 N. BLAIR ST. #1

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

FEC Identification Number

C []
Transaction ID : SB30B.I2278I
Amount of Each Disbursement this Period
[] 1210.24

Memo Item

Full Name (Last, First, Middle Initial)

C. DICKIE, RICHARD, , ,

Mailing Address 126 N. BLAIR ST. #1

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

FEC Identification Number

C []
Transaction ID : SB30B.I2278I
Amount of Each Disbursement this Period
[] 55.00

Memo Item

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

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

[] 1464.72

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. GLASS NICKEL PIZZA

Full Name (Last, First, Middle Initial)

Mailing Address 2916 ATWOOD AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement VOLUNTEER FOOD

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2287

Amount of Each Disbursement this Period: 55.00

Memo Item

B. DILLON, CATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3612 CALVEND LANE

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I22785

Amount of Each Disbursement this Period: 366.42

Memo Item

C. DUFFEY, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 726 WINDSOR COURT

City WAUWATOSA State WI Zip Code 53226

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C

Transaction ID : SB30B.I2278

Amount of Each Disbursement this Period: 3161.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3527.67

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. DUFFEY, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 726 WINDSOR COURT		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2279I Amount of Each Disbursement this Period 6404.77	
City WAUWATOSA	State WI	Zip Code 53226	Category/ Type
Purpose of Disbursement PAYROLL		Memo Item <input type="checkbox"/>	
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. FOSTER, JOHN, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 2416 E WASHINGTON AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2279I Amount of Each Disbursement this Period 859.97	
City MADISON	State WI	Zip Code 53704	Category/ Type
Purpose of Disbursement PAYROLL		Memo Item <input type="checkbox"/>	
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. GARRETT, PATRICK, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 11507 BROOKSHIRE DR.		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2279I Amount of Each Disbursement this Period 1635.14	
City ORLAND PARK	State IL	Zip Code 60467	Category/ Type
Purpose of Disbursement PAYROLL		Memo Item <input type="checkbox"/>	
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).....▶	8899.88
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. GARRETT, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11507 BROOKSHIRE DR.

City ORLAND PARK State IL Zip Code 60467

Purpose of Disbursement
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C
Transaction ID : SB30B.I2279f
Amount of Each Disbursement this Period: 131.40

Memo Item

B. MILEAGE

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C
Transaction ID : SB30B.I2287f
Amount of Each Disbursement this Period: 131.40

Memo Item

C. GEHL, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1179 COLUMBUS CIRCLE

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C
Transaction ID : SB30B.I2279f
Amount of Each Disbursement this Period: 944.69

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1076.09

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. GRAVLEE, MARTHA, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 2907 BIG TIMBER CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280' Amount of Each Disbursement this Period 1535.25
City SUAMICO	State WI	Zip Code 54313
Purpose of Disbursement PAYROLL		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HEATH, BENJAMIN, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 514 E WASHINGTON AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280' Amount of Each Disbursement this Period 1198.66
City MADISON	State WI	Zip Code 53703
Purpose of Disbursement PAYROLL		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HEIMBACH, DONNA, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 3002 DIANNE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280' Amount of Each Disbursement this Period 675.97
City MIDDLETON	State WI	Zip Code 53562
Purpose of Disbursement PAYROLL		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3409.88
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. HUFFMAN, CARLTON, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 2279 W PERSHING STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280I Amount of Each Disbursement this Period 1116.22
City APPLETON	State WI	Zip Code 54914
Purpose of Disbursement PAYROLL		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HUFFMAN, CARLTON, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 2279 W PERSHING STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2280I Amount of Each Disbursement this Period 146.70
City APPLETON	State WI	Zip Code 54914
Purpose of Disbursement EXPENSE REIMBURSEMENT		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MILEAGE		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2287 Amount of Each Disbursement this Period 146.70
City	State	Zip Code
Purpose of Disbursement MILEAGE EXPENSE		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:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1262.92
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

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

Mailing Address **5126 FOUSER FARM ROAD**

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

Purpose of Disbursement **PAYROLL**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **11 / 30 / 2015**

FEC Identification Number: **C**
Transaction ID : SB30B.I2281'
Amount of Each Disbursement this Period: **187.45**

Memo Item

Full Name (Last, First, Middle Initial)
B. LEONE, ANNA, , ,

Mailing Address **801 W JOHNSON STREET**

City **MADISON** State **WI** Zip Code **53706**

Purpose of Disbursement **PAYROLL**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **11 / 30 / 2015**

FEC Identification Number: **C**
Transaction ID : SB30B.I22813
Amount of Each Disbursement this Period: **182.82**

Memo Item

Full Name (Last, First, Middle Initial)
C. LOOMIS, LARRY, , ,

Mailing Address **762 BRIAR LN**

City **BELOIT** State **WI** Zip Code **53511**

Purpose of Disbursement **PAYROLL**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **11 / 30 / 2015**

FEC Identification Number: **C**
Transaction ID : SB30B.I2281
Amount of Each Disbursement this Period: **543.65**

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **913.92**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. POOLE, SCOTT, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1528 SELLERY STREET		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2281 Amount of Each Disbursement this Period [REDACTED] 458.43	
City MIDDLETON	State WI	Zip Code 53562	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. RECTOR, JASON, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1902 40TH AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2281 Amount of Each Disbursement this Period [REDACTED] 1236.70	
City OSCEOLA	State WI	Zip Code 54020	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. RIPKEY, HANNAH, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 1021 TARRANT DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2282 Amount of Each Disbursement this Period [REDACTED] 315.29	
City FONTANA	State WI	Zip Code 53125	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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 <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2010.42
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ROHL, EMELIA, , ,

Mailing Address W1794 COUNTY ROAD MM

City PRESCOTT State WI Zip Code 54021

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2015

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2282
Amount of Each Disbursement this Period

[REDACTED] 267.70

Memo Item

Full Name (Last, First, Middle Initial)

B. ROHL, EMELIA, , ,

Mailing Address W1794 COUNTY ROAD MM

City PRESCOTT State WI Zip Code 54021

Purpose of Disbursement
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2015

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2282
Amount of Each Disbursement this Period

[REDACTED] 133.60

Memo Item

Full Name (Last, First, Middle Initial)

C. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2015

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2287
Amount of Each Disbursement this Period

[REDACTED] 93.60

Memo Item

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

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

[REDACTED] 401.30

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. SAPP, JAMES, , ,

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2282f

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. SAPP, JAMES, , ,

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2282f

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2288

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. SEXAUER, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 9023 COTSWALD WAY		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2282i Amount of Each Disbursement this Period 1141.22	
City NEW PORT RICHEY	State FL	Zip Code 34655	Category/ Type
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
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. SEXAUER, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address 9023 COTSWALD WAY		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2282i Amount of Each Disbursement this Period 586.80	
City NEW PORT RICHEY	State FL	Zip Code 34655	Category/ Type
Purpose of Disbursement EXPENSE REIMBURSEMENT			
Candidate Name		Memo Item <input type="checkbox"/>	
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. MILEAGE		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015	
Mailing Address		FEC Identification Number C [REDACTED] Transaction ID : SB30B.I2288 Amount of Each Disbursement this Period 544.44	
City	State	Zip Code	Category/ Type
Purpose of Disbursement MILEAGE EXPENSE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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).....▶	1728.02
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. STOLTE, CARL, , ,

Mailing Address 3519 ROMA LANE

City
MIDDLETON

State
WI

Zip Code
53562

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

FEC Identification Number

C [Redacted]
Transaction ID : SB30B.I2283'
Amount of Each Disbursement this Period
[Redacted] 213.58

Memo Item

Full Name (Last, First, Middle Initial)

B. WILSON, JOSHUA, , ,

Mailing Address 641 W. MAIN STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

FEC Identification Number

C [Redacted]
Transaction ID : SB30B.I2283'
Amount of Each Disbursement this Period
[Redacted] 442.28

Memo Item

Full Name (Last, First, Middle Initial)

C. ZDROIK, JOSHUA, , ,

Mailing Address 756 BUS LANE

City
STEVENS POINT

State
WI

Zip Code
54482

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

FEC Identification Number

C [Redacted]
Transaction ID : SB30B.I2283'
Amount of Each Disbursement this Period
[Redacted] 1143.05

Memo Item

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

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

[Redacted]	1798.91
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[Redacted]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C
Transaction ID : SB30B.I2275I
Amount of Each Disbursement this Period: 70.57

Memo Item

Full Name (Last, First, Middle Initial)
B. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C
Transaction ID : SB30B.I2275I
Amount of Each Disbursement this Period: 10.83

Memo Item

Full Name (Last, First, Middle Initial)
C. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2015

FEC Identification Number: C
Transaction ID : SB30B.I2275I
Amount of Each Disbursement this Period: 79.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 160.40

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		3	0		2	0	1	5		

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL TAX

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2275
Amount of Each Disbursement this Period

[REDACTED] 14024.35

Candidate Name

Category/Type

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

Memo Item

Full Name (Last, First, Middle Initial)

B. ACCOUNTANTS WORLD PAYROLL LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		3	0		2	0	1	5		

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement
PAYROLL TAX

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2275
Amount of Each Disbursement this Period

[REDACTED] 82.88

Candidate Name

Category/Type

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

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]

Candidate Name

Category/Type

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

Memo Item

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

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

[REDACTED] 14107.23

[REDACTED] 98304.68

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID : MCW121815

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- Presidential-Only Election Year (28% Federal)
- Presidential and Senate Election Year (36% Federal)
- Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	MM / DD / YYYY 11 / 02 / 2015	1384.49

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1384.49
Transaction ID : MCW121815B	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 11 / 10 / 2015	TOTAL AMOUNT TRANSFERRED 8512.50
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	8512.50
Transaction ID : MCW121815C	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	MM / DD / YYYY 11 / 17 / 2015	6204.04

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	6204.04
Transaction ID : MCW121815D	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

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

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

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 11 / 25 / 2015	TOTAL AMOUNT TRANSFERRED 1576.21
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1576.21
Transaction ID : MCW121815E	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	17677.24
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	17677.24

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 121815A BMO HARRIS BANK
Mailing Address PO BOX 3052
City MILWAUKEE State WI Zip Code 53201
Purpose of Disbursement: CREDIT CARD PAYMENT
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 11 / 02 / 2015
FEDERAL SHARE 123.54 + NONFEDERAL SHARE 219.63 = TOTAL AMOUNT 343.17

B. Full Name (Last, First, Middle Initial) Transaction ID : 121815B CITY TREASURER - WATER/SEWER
Mailing Address PO BOX 2997
City MADISON State WI Zip Code 53701
Purpose of Disbursement: UTILITIES
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 11 / 02 / 2015
FEDERAL SHARE 33.49 + NONFEDERAL SHARE 59.55 = TOTAL AMOUNT 93.04

C. Full Name (Last, First, Middle Initial) Transaction ID : 121815C COCA COLA ENTERPRISES
Mailing Address 2335 PAYSHERE CIRCLE
City CHICAGO State IL Zip Code 60674
Purpose of Disbursement: OFFICE SODA
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 11 / 02 / 2015
FEDERAL SHARE 7.60 + NONFEDERAL SHARE 13.50 = TOTAL AMOUNT 21.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 164.63, 292.68, 457.31

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: MG&E Transaction ID: 121815D. Includes fields for Mailing Address (PO BOX 1231), City (MADISON), State (WI), Zip Code (53701), Purpose of Disbursement (UTILITIES), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 340.03, NONFEDERAL SHARE 604.49, TOTAL AMOUNT 944.52.

Form B: PERSONNEL CONCEPTS Transaction ID: 121815E. Includes fields for Mailing Address (PO BOX 5750), City (CAROL STREAM), State (IL), Zip Code (60197), Purpose of Disbursement (HUMAN RESOURCE COMPLIANCE), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 94.12, NONFEDERAL SHARE 167.32, TOTAL AMOUNT 261.44.

Form C: PRO ONE JANITORIAL INC Transaction ID: 121815F. Includes fields for Mailing Address (1101 ASHWAUBENON STREET), City (GREEN BAY), State (WI), Zip Code (54304), Purpose of Disbursement (JANITORIAL SERVICES), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 180.00, NONFEDERAL SHARE 320.00, TOTAL AMOUNT 500.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 614.15, NONFEDERAL SHARE 1091.81, TOTAL AMOUNT 1705.96.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 121815G <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
BK-DSI LLC Mailing Address 405 DORAL COURT			Allocated Activity or Event Year-To-Date 24259.77		
City WAUNAKEE	State WI	Zip Code 53597	Date: MM / DD / YYYY 11 / 10 / 2015		
Purpose of Disbursement: DATA SERVICES		<input type="checkbox"/> Category/ Type	Allocated Activity or Event Year-To-Date 1732.50 + 3080.00 = 4812.50		
Activity or Event Identifier:					

B. Full Name (Last, First, Middle Initial) Transaction ID : 121815H <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
DAN MORSE CONSULTING LLC Mailing Address 5205 BARTON ROAD			Allocated Activity or Event Year-To-Date 249593.77		
City MADISON	State WI	Zip Code 53711	Date: MM / DD / YYYY 11 / 10 / 2015		
Purpose of Disbursement: FUNDRAISING CONSULTING - NOT FEA		<input type="checkbox"/> Category/ Type	Allocated Activity or Event Year-To-Date 2520.00 + 4480.00 = 7000.00		
Activity or Event Identifier:					

C. Full Name (Last, First, Middle Initial) Transaction ID : 121815I <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
KONICA MINOLTA PREMIER FINANCE Mailing Address PO BOX 740423			Allocated Activity or Event Year-To-Date 251027.05		
City ATLANTA	State GA	Zip Code 30374	Date: MM / DD / YYYY 11 / 10 / 2015		
Purpose of Disbursement: COPIER LEASE		<input type="checkbox"/> Category/ Type	Allocated Activity or Event Year-To-Date 515.98 + 917.30 = 1433.28		
Activity or Event Identifier:					

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4768.48		8477.30		13245.78

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[Empty]	[Empty]	[Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 121815J ORKIN EXTERMINATING. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event details.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 121815K ADVANCED DISPOSAL MADISON. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event details.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 121815L ASPECT CONSULTING. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 2261.48, 4020.40, 6281.88.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: BADGERLAND CHEMICAL & SUPPLY. Transaction ID: 121815M. Mailing Address: PO BOX 620303, MIDDLETON, WI 53562. Purpose: CLEANING SUPPLIES. Allocated Activity: Administrative (checked). Year-To-Date: 257425.88. Date: 11/17/2015. Summary: FEDERAL SHARE 42.10, NONFEDERAL SHARE 74.85, TOTAL AMOUNT 116.95.

Form B: CENTURY SPRINGS BOTTLING CO. Transaction ID: 121815N. Mailing Address: PO BOX 856858, MINNEAPOLIS, MN 55485. Purpose: OFFICE WATER. Allocated Activity: Administrative (checked). Year-To-Date: 257486.88. Date: 11/17/2015. Summary: FEDERAL SHARE 21.96, NONFEDERAL SHARE 39.04, TOTAL AMOUNT 61.00.

Form C: CHARTER. Transaction ID: 121815O. Mailing Address: PO BOX 2981, MILWAUKEE, WI 53201. Purpose: CABLE. Allocated Activity: Administrative (checked). Year-To-Date: 257724.06. Date: 11/17/2015. Summary: FEDERAL SHARE 85.38, NONFEDERAL SHARE 151.80, TOTAL AMOUNT 237.18.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 149.44, NONFEDERAL SHARE 265.69, TOTAL AMOUNT 415.13.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 121815P
IMPACT ACQUISITIONS LLC
Mailing Address 75 REMITTANCE DRIVE
City CHICAGO State IL Zip Code 60675
Purpose of Disbursement: OFFICE SUPPLIES
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 11 / 17 / 2015
FEDERAL SHARE 60.77 + NONFEDERAL SHARE 108.03 = TOTAL AMOUNT 168.80

B. Full Name (Last, First, Middle Initial) Transaction ID : 121815Q
LEXISNEXIS
Mailing Address PO BOX 2314
City CAROL STREAM State IL Zip Code 60132
Purpose of Disbursement: SUBSCRIPTION
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 11 / 17 / 2015
FEDERAL SHARE 136.44 + NONFEDERAL SHARE 242.56 = TOTAL AMOUNT 379.00

C. Full Name (Last, First, Middle Initial) Transaction ID : 121815R
LIND WEININGER LLC
Mailing Address 8020 EXCELSIOR DRIVE #402
City MADISON State WI Zip Code 53717
Purpose of Disbursement: LEGAL SERVICES
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 11 / 17 / 2015
FEDERAL SHARE 360.00 + NONFEDERAL SHARE 640.00 = TOTAL AMOUNT 1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 557.21, 990.59, 1547.80

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [], [], []

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 121815S <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
WEST BEND MUTUAL Mailing Address 1900 S 18TH AVENUE			Allocated Activity or Event Year-To-Date 260775.86		
City WEST BEND	State WI	Zip Code 53095	Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: INSURANCE		<input type="text"/>	Allocated Activity or Event Year-To-Date 260775.86		
Activity or Event Identifier:			Date <input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="541.44"/>		<input type="text" value="962.56"/>		<input type="text" value="1504.00"/>	

B. Full Name (Last, First, Middle Initial) Transaction ID : 121815U <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
CITY TREASURER - WATER/SEWER Mailing Address PO BOX 2997			Allocated Activity or Event Year-To-Date 260874.18		
City MADISON	State WI	Zip Code 53701	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: UTILITIES		<input type="text"/>	Allocated Activity or Event Year-To-Date 260874.18		
Activity or Event Identifier:			Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="35.40"/>		<input type="text" value="62.92"/>		<input type="text" value="98.32"/>	

C. Full Name (Last, First, Middle Initial) Transaction ID : 121815V <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
MG&E Mailing Address PO BOX 1231			Allocated Activity or Event Year-To-Date 261759.02		
City MADISON	State WI	Zip Code 53701	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: UTILITIES		<input type="text"/>	Allocated Activity or Event Year-To-Date 261759.02		
Activity or Event Identifier:			Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="318.54"/>		<input type="text" value="566.30"/>		<input type="text" value="884.84"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
895.38		1591.78		2487.16

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 121815W
TDS METROCOM
Mailing Address PO BOX 94510
City PALATINE State IL Zip Code 60094
Purpose of Disbursement: OFFICE PHONES
Allocated Activity or Event: Administrative
FEDERAL SHARE 122.58 NONFEDERAL SHARE 217.93 TOTAL AMOUNT 340.51

B. Full Name (Last, First, Middle Initial) Transaction ID : 121815X
TDS METROCOM
Mailing Address PO BOX 94510
City PALATINE State IL Zip Code 60094
Purpose of Disbursement: OFFICE PHONES
Allocated Activity or Event: Administrative
FEDERAL SHARE 410.10 NONFEDERAL SHARE 729.06 TOTAL AMOUNT 1139.16

C. Full Name (Last, First, Middle Initial) Transaction ID : 121815Y
OFFICE DEPOT
Mailing Address 13770 W MAPLE ROAD
City OMAHA State NE Zip Code 68164
Purpose of Disbursement: OFFICE SUPPLIES
Allocated Activity or Event: Administrative
FEDERAL SHARE 10.65 NONFEDERAL SHARE 18.93 TOTAL AMOUNT 29.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 532.68, 946.99, 1479.67

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: BEST BUY. Transaction ID: 121815Z. Mailing Address: 7357 W TOWNE WAY, MADISON, WI 53719. Purpose: OFFICE SUPPLIES. Date: 09/20/2015. Total Amount: 126.59.

Form B: PINKUS MCBRIDE. Transaction ID: 121815AB. Mailing Address: 301 N HAMILTON STREET, MADISON, WI 53703. Purpose: MEETING EXPENSE. Date: 09/22/2015. Total Amount: 5.08.

Form C: AMAZON.COM. Transaction ID: 121815AC. Mailing Address: 410 TERRY AVENUE N, SEATTLE, WA 98109. Purpose: OFFICE SUPPLIES. Date: 09/23/2015. Total Amount: 18.98.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: Amazon.com, Transaction ID: 121815AD. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), and Allocated Activity or Event (Administrative). Total amount: 23.69.

Form B: Amazon.com, Transaction ID: 121815AE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), and Allocated Activity or Event (Administrative). Total amount: 16.93.

Form C: Walgreens, Transaction ID: 121815AF. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), and Allocated Activity or Event (Administrative). Total amount: 11.05.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (0.00), NONFEDERAL SHARE (0.00), TOTAL AMOUNT (0.00).

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 121815AG FEDEX. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event. Total Amount: 6.20.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 121815AH FEDEX. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event. Total Amount: 30.96.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 121815AJ INSTY PRINTS. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event. Total Amount: 74.11.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 9943.45, 17677.24, 27620.69.