

**FEC  
FORM 3P****REPORT OF RECEIPTS  
AND DISBURSEMENTS**BY AN AUTHORIZED COMMITTEE OF A CANDIDATE  
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

SCOTT WALKER INC

ADDRESS (number and street)

PO BOX 620590

Check if different  
than previously  
reported. (ACC)

MIDDLETON

CITY

WI

STATE

53562

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00580480

3. THIS REPORT IS FOR Primary ☐ or General ☐

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER) ☐

Quarterly Reports:

Monthly Reports:

☐ April 15 (Q1) ☒ October 15 (Q3)  
☐ July 15 (Q2) ☐ January 31 Year-End Report (YE)

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

☐ Thirtieth day report following the General Election  
on  /  / 
☐ Twelfth day report preceding  election  
on  /  /  in the State of 

Is this Report an Amendment?



yes



no

5. Covering Period

06

17

2015

through

09

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.

Type or Print Name of Treasurer KATE LIND

Signature of Treasurer

KATE LIND

[Electronically Filed]

Date

03

23

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  
All previous versions of this form are obsolete and should no longer be used.

Office  
Use  
Only

Write or Type Committee Name

**SCOTT WALKER INC**

Report Covering the Period:

From:

MM / DD / YYYY  
06 / 17 / 2015

To:

MM / DD / YYYY  
09 / 30 / 2015**SUMMARY**

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	0.00
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	7376470.56
8. SUBTOTAL (Lines 6 and 7) .....	7376470.56
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	6393957.13
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	982513.43
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	161133.45
13. EXPENDITURES SUBJECT TO LIMITATION .....	0.00

**NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES**

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	7353991.11
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	6371557.13

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Receipts

PAGE 3 / 2740

NAME OF COMMITTEE (in Full)

**SCOTT WALKER INC**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
06 / 17 / 2015

To:

M M / D D / Y Y Y Y  
09 / 30 / 2015**I. RECEIPTS****COLUMN A  
Total This Period****COLUMN B  
Election Cycle-to-Date**

16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized .....	4699491.54	4699491.54
(ii) unitemized .....	2651959.57	2651959.57
(iii) Total contributions .....	7351451.11	7351451.11
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	23400.00	23400.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) .....	7374851.11	7374851.11
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating .....	1540.00	1540.00
(b) Fundraising .....	0.00	0.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	1540.00	1540.00
21. OTHER RECEIPTS (Dividends, Interest, etc.) .....	79.45	79.45
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) .....	7376470.56	7376470.56

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

PAGE 4 / 2740

NAME OF COMMITTEE (in Full)

**SCOTT WALKER INC**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
06 / 17 / 2015

To:

M M / D D / Y Y Y Y  
09 / 30 / 2015**II. DISBURSEMENTS****COLUMN A**  
Total This Period**COLUMN B**  
Calendar Year-to-Date

23. OPERATING EXPENDITURES.....	6373097.13	6373097.13
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	15860.00	15860.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees .....	5000.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) .....	20860.00	20860.00
29. OTHER DISBURSEMENTS .....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	6393957.13	6393957.13

**III. CONTRIBUTED ITEMS**  
(Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00	
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FEC FORM 3P,  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES  
BY STATE FOR  
A PRESIDENTIAL CANDIDATE**  
(Used Only by Primary Committees Receiving  
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C

C00580480

SCOTT WALKER INC

ADDRESS (number and street)

PO BOX 620590

MIDDLETON

CITY

WI

STATE

53562

ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

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

Form/Schedule: F3PA

Transaction ID :

As of the date of this filing, the Scott Walker Inc. committee is in the process of refunding contributions designated toward the General election. These refunds will be reflected on the next regularly scheduled report.

Form/Schedule:

Transaction ID:

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KNUTE AARSHEIM**

Mailing Address 305 DELANO RD

City	State	Zip Code
MARION	MA	02738

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ACT I, INC.

Occupation  
BOAT OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115685**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**MARINA S ABAD**

Mailing Address 9707 SIGNAL COURT

City	State	Zip Code
MANASSAS	VA	20111

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MATRIX MEDICAL NETWORK

Occupation  
NURSE PRACTITIONER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115686**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**JOAN ABBETT**

Mailing Address 213 S. 75 E.

City	State	Zip Code
VALPARAISO	IN	46383

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115688**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**JAMES R ABBOTT**

Mailing Address 19618 OLD GALVESTON

City	State	Zip Code
WEBSTER	TX	77598

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115690**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**EDWARD ABELL**

Mailing Address PO BOX 3507

City	State	Zip Code
LAFAYETTE	LA	70502

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ONEBANE LAW FIRM

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115692**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**KENNETH ABRAMOWIR**

Mailing Address PO BOX 958

City	State	Zip Code
SOUTHPORT	CT	06890

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NGN CAPITAL

Occupation  
ANALYST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.115694**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**NIRA ABRAMOWITZ**

Mailing Address PO BOX 958

City

SOUTHPORT

State

CT

Zip Code

06890

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NGN CAPITAL

Occupation

ANALYST

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.115696**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 03 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**ROBERT ABRAMOWSKI**

Mailing Address 9253 SPINDLE TOP CT

City

FRANKLIN

State

WI

Zip Code

53132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115698**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**GREGORY T ABRAMSON**

Mailing Address 608 LAKE COLONY POINTE

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ABRAMSON LLC

Occupation

CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115700**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 23 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BART ADAMS**

Mailing Address 2820 N PARK DRIVE

City	State	Zip Code
WAUWATOSA	WI	53222

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SIKICH, LLP

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115702**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**JOHN ADAMS**

Mailing Address 1616 S PENINSULA DR

City	State	Zip Code
DAYTONA BEACH	FL	32118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115703**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**JOHN ADAMS**

Mailing Address 1616 S PENINSULA DR

City	State	Zip Code
DAYTONA BEACH	FL	32118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.115704**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1200.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PATRICK F ADAMS**

Mailing Address 4351 GULF SHORE BLVD N

City	State	Zip Code
NAPLES	FL	34103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115706**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**RICKIE ADAMS**

Mailing Address 1915 E CLIFF POINT DRIVE

City	State	Zip Code
SAINT GEORGE	UT	84790

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.115708**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

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

**WENDY ADAMS**

Mailing Address 10141 SYCAMORE CIRCLE

City	State	Zip Code
VILLA PARK	CA	92861

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RISE UP FOUNDATION

Occupation  
AUTHOR, NON-PROFIT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.115710**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3220.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DAVID ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAMPUS APARTMENTS**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.115712**

Date of Receipt

**07 / 22 / 2015**

SEE REDESIGNATION & REATTRIBUTION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

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

**DAVID ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAMPUS APARTMENTS**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128916**

Date of Receipt

**07 / 22 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**DAVID ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAMPUS APARTMENTS**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.128917**

Date of Receipt

**07 / 22 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**DAVID ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CAMPUS APARTMENTS

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128918**

Date of Receipt

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

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**DAVID ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CAMPUS APARTMENTS

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128921**

Date of Receipt

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

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**HALLEE ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128920**

Date of Receipt

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

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**HALLEE ADELMAN**

Mailing Address 503 WALDRON PARK DRIVE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128922**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**RON ADKINS**

Mailing Address 3199 PLUMMERS DR

City	State	Zip Code
CHICO	CA	95973

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RV REPAIR SERVICE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115714**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**ANN MARIE ADREANI**

Mailing Address 4211 RUTGERS LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115716**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JUERG AESCHBACH**

Mailing Address 1032 IRVING STREET UNIT 968

City	State	Zip Code
SAN FRANCISCO	CA	94122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AESCHBACH, INC.

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115717**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**JUERG AESCHBACH**

Mailing Address 1032 IRVING STREET UNIT 968

City	State	Zip Code
SAN FRANCISCO	CA	94122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AESCHBACH, INC.

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115718**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**CHRISTOP AGER**

Mailing Address 4 EDGEWOOD RUN

City	State	Zip Code
AMHERST	NH	03031

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BAE SYSTEMS

Occupation  
MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

**Transaction ID : SA17A.115720**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

2600.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DOMINICK AGRON**

Mailing Address **PO BOX 10**

City	State	Zip Code
<b>DINGMANS FERRY</b>	<b>PA</b>	<b>18328</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REGENERON**

Occupation  
**MANAGERIAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.115722**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>14</b>		<b>2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**JOHN AHL**

Mailing Address **532 NORTH ROOSEVELT RD**

City	State	Zip Code
<b>BLACK RIVER FALLS</b>	<b>WI</b>	<b>54615</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NORTHERN FAMILY FARMS**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.115724**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>17</b>		<b>2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**WOODY AHLBORN**

Mailing Address **PO BOX 500**

City	State	Zip Code
<b>SAYNER</b>	<b>WI</b>	<b>54560</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AHLBORN EQUIPMENT, INC.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122455**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>06</b>		<b>19</b>		<b>2015</b>

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**6400.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address PO BOX 500

City	State	Zip Code
SAYNER	WI	54560

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AHLBORN EQUIPMENT, INC.

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122455.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

Mailing Address PO BOX 500

City	State	Zip Code
SAYNER	WI	54560

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EAGLE RIVER ANIMAL HOSPITAL

Occupation  
VETERINARIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122455.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

Mailing Address 10509 BRIAR RD

City	State	Zip Code
BLOOMINGTON	MN	55437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RCA CONSULTING

Occupation  
PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.7657**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

100.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**TED R AHRENS**

Mailing Address 3815 KASKASKIA ROAD

City	State	Zip Code
FULTS	IL	62244

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AHRENS CONTRACTING

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115726**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**PATRICIA AIKIN**

Mailing Address 11545 N. PA BE SHAN TRAIL

City	State	Zip Code
CHARLEVOIX	MI	49720

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115728**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**PATRICIA AIKIN**

Mailing Address 11545 N. PA BE SHAN TRAIL

City	State	Zip Code
CHARLEVOIX	MI	49720

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.7705**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AINLEY ENTERPRISES LLC**

Occupation  
**PROPERTY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115729**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AINLEY ENTERPRISES LLC**

Occupation  
**PROPERTY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.115730**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AINLEY ENTERPRISES LLC**

Occupation  
**PROPERTY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.115731**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

450.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AINLEY ENTERPRISES LLC**

Occupation  
**PROPERTY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.115732**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AINLEY ENTERPRISES LLC**

Occupation  
**PROPERTY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

**Transaction ID : SA17A.115733**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AINLEY ENTERPRISES LLC**

Occupation  
**PROPERTY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115734**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

350.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

C

Name of Employer  
AINLEY ENTERPRISES LLC

Occupation  
PROPERTY MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.115735**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**PAT AINLEY**

Mailing Address PO BOX 3908

City	State	Zip Code
CRESTLINE	CA	92325

FEC ID number of contributing federal political committee.

C

Name of Employer  
AINLEY ENTERPRISES LLC

Occupation  
PROPERTY MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

**Transaction ID : SA17A.115736**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**DANIEL ALANIS**

Mailing Address 1678 GOAT HILL RD

City	State	Zip Code
LAKEHILLS	TX	78063

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115737**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**LAURETTE L ALBAUGH**

Mailing Address 1075 FULTON AVE. APT. 2

City	State	Zip Code
SACRAMENTO	CA	95825

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.50

**Transaction ID : SA17A.115739**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

200.50

☐ Memo Item

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

**STEVEN ALBINGER**

Mailing Address 4262 JACKSON DRIVE

City	State	Zip Code
JACKSON	WI	53037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
COURI IRS

Occupation  
VP SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115741**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**WILLIAM D ALCOTT**

Mailing Address 27430 LANE

City	State	Zip Code
ST CLAIR SHORES	MI	48081

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115743**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1450.50

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WELDON W ALDERS**

Mailing Address 11099 GOOSE PRAIRIE ROAD

City	State	Zip Code
MIDWAY	TX	75852

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115745**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**GRANT ALDONAS**

Mailing Address 2819 NORTH JEFFERSON STREET

City	State	Zip Code
ARLINGTON	VA	22207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SPLIT ROCK INTERNATIONAL, INC.**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.115747**

Date of Receipt

**07 / 10 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**LARRY ALDRIDGE**

Mailing Address 1429 KENNETH DR

City	State	Zip Code
RANTOUL	IL	61866

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.115748**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2975.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**STAN ALEKNA**

Mailing Address 732 ASPEN LANE

City	State	Zip Code
LEBANON	PA	17042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115749**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**DAVE ALEXANDER**

Mailing Address 104 VAUGHN RD

City	State	Zip Code
NASHVILLE	TN	37221

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TOA

Occupation  
MD

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115750**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**GERARD ALEXANDER**

Mailing Address 112 5TH ST SE APT 4A

City	State	Zip Code
CHARLOTTESVIL	VA	22902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UNIVERSITY OF VIRGINIA

Occupation  
PROFESSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.115752**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2900.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KEITH ALEXANDER**

Mailing Address **N61 W28983 PARKSIDE PLACE**

City <b>HARTLAND</b>	State <b>WI</b>	Zip Code <b>53029</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**VISU-SEWER, INC.**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.115754**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

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

**ROBERT ALEXANDER**

Mailing Address **324 E WISCONSIN AVE**

City <b>NEENAH</b>	State <b>WI</b>	Zip Code <b>54956</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.115755**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

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

**A. M ALICANDRO**

Mailing Address **17 STUYVESANT OVAL**

City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10009</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PRICE WATER HOUSE COOPERS**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.115757**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1350.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **23259 VILLENA**

City State Zip Code  
**MISSION VIEJO CA 92692**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.115759**

Date of Receipt

**09 / 13 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

Mailing Address **78 RIVER RD**

City State Zip Code  
**COS COB CT 06807**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DISCOVERY CAPITAL**

Occupation  
**GLOBAL RELATIONSHIP MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.115761**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

Mailing Address **13893 WILLOW CAY DRIVE**

City State Zip Code  
**NORTH PALM BEACH FL 33408**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROBERT ALLEN LAW**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.115763**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2500.00**

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BRUCE ALLEN**

Mailing Address 12 EATON WOODS ROAD

City	State	Zip Code
E. KINGSTON	NH	03827

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115764**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**GREGORY ALLEN**

Mailing Address 25426 EDMONT DRIVE

City	State	Zip Code
SOUTHFIELD	MI	48033

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
MEDICAL DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115765**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**GREGORY ALLEN**

Mailing Address 25426 EDMONT DRIVE

City	State	Zip Code
SOUTHFIELD	MI	48033

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
MEDICAL DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.115766**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

200.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **713 WADEFIELD CT**

City	State	Zip Code
EL PASO	TX	79922

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.115767**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

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

Mailing Address **S3W31343 WALNUT HOLW**

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALLEN MANAGEMENT**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1350.00**

**Transaction ID : SA17A.115769**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

**1350.00**

☐ Memo Item

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

Mailing Address **CMR 427, BOX 3541**

City	State	Zip Code
APO	AE	09630

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**U.S. ARMY**

Occupation  
**DOCTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.115771**

Date of Receipt

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

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1700.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JUDY ALLEN**

Mailing Address 2041 FRANSWORTH DR

City	State	Zip Code
NASHVILLE	TN	37205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

256.00

**Transaction ID : SA17A.115772**

Date of Receipt

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

Amount of Each Receipt this Period

103.00

☐ Memo Item

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

**ROMOLA ALLEN**

Mailing Address 1747 EAST MCMILLAN STRE

City	State	Zip Code
CINCINNATI	OH	45206

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115774**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**SUSAN H ALLEN**

Mailing Address S3W31343 WALNUT HOLW

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ALLEN MANAGEMENT, INC.

Occupation  
BUSINESS EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.115776**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

REATTRIBUTED

Amount of Each Receipt this Period

1350.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

353.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**SUSAN M ALLEN**

Mailing Address 325 LAKE RD

City	State	Zip Code
MENASHA	WI	54952

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NEW ANESTHESIOLOGY

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115778**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**SUSAN M ALLEN**

Mailing Address 325 LAKE RD

City	State	Zip Code
MENASHA	WI	54952

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NEW ANESTHESIOLOGY

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.115779**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**WILLIAM ALLEN**

Mailing Address 2090 LOS ALTOS AVE

City	State	Zip Code
CLOVIS	CA	93611

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115781**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DAVID ALLISON**

Mailing Address 3915 GREEN JADE DR

City	State	Zip Code
SPRING	TX	77386

FEC ID number of contributing federal political committee.

C

Name of Employer  
HALIBURTO

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.115782**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**WILLIAM ALLMON**

Mailing Address 1625 WESTWIND ROAD

City	State	Zip Code
LAS VEGAS	NV	89146

FEC ID number of contributing federal political committee.

C

Name of Employer  
LAS-CAL CORPORATION

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115784**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**ROBERT W ALLSOP**

Mailing Address 2115 FIRST AVENUE SE

City	State	Zip Code
CEDAR RAPIDS	IA	52402

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115786**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JIM ALTAMIRANO**

Mailing Address 3970 ELLENITA AVE.

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE GAS COMPANY**

Occupation  
**FIELD COLLECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115788**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**MIKHAIL ALTERMAN**

Mailing Address 3148 RICHMOND RD

City	State	Zip Code
BEACHWOOD	OH	44122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PDBC**

Occupation  
**TECHNICAL CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.115790**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

240.00

☐ Memo Item

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

**TOD ALTHOFF**

Mailing Address 8001 S ROUTE 31

City	State	Zip Code
CRYSTAL LAKE	IL	60014

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ALTHOFF INDUSTRIES**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115792**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

740.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KENNETH AMAN**

Mailing Address 3600 WINSTON DRIVE

City	State	Zip Code
HOFFMAN ESTATES	IL	60192

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.115794**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

275.00

☐ Memo Item

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

**MICHAEL AMEEL**

Mailing Address 5 MANTENIDA

City	State	Zip Code
TRABUCO CANYON	CA	92679

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115796**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 05 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**F. C AMERSON**

Mailing Address P.O. BOX 4623

City	State	Zip Code
MACON	GA	31208

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMERSON CONSTRUCTION CO

Occupation  
GENERAL CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115798**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 05 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1025.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **1969 WOOD BLUFF TRAIL**

City <b>ASHEBORO</b>	State <b>NC</b>	Zip Code <b>27205</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.115799**

Date of Receipt

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

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

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

Mailing Address **301 WEST MCLELLAN BOULE**

City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85013</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VAC**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.115801**

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

Mailing Address **140 AMMONS DR**

City <b>RALEIGH</b>	State <b>NC</b>	Zip Code <b>27615</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.115803**

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5500.00**

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**RALPH AMOS**

Mailing Address 9120 N COUNTY ROAD 925

City	State	Zip Code
ALEXANDRIA	IN	46001

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.115805**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

**RALPH AMOS**

Mailing Address 9120 N COUNTY ROAD 925

City	State	Zip Code
ALEXANDRIA	IN	46001

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.115806**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**ERIC AMSTUTZ**

Mailing Address 17 RIDGELAND DRIVE

City	State	Zip Code
GREENVILLE	SC	29601

FEC ID number of contributing federal political committee.

C

Name of Employer  
WYCHE, P.A.

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115808**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ROGELIO ANCHETA**

Mailing Address 2411 ALLEN BLVD

City	State	Zip Code
BEACHWOOD	OH	44122

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.115809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**JACK ANCONE**

Mailing Address 8850 OLD MILL CREEK

City	State	Zip Code
BREHAM	TX	77833

FEC ID number of contributing federal political committee.

C

Name of Employer  
APPLIED ENERGY TECH CO

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115811**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JACK ANCONE**

Mailing Address 8850 OLD MILL CREEK

City	State	Zip Code
BREHAM	TX	77833

FEC ID number of contributing federal political committee.

C

Name of Employer  
APPLIED ENERGY TECH CO

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115812**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**AGNES V ANDERSON**

Mailing Address 890 WIXFORD WAY

City	State	Zip Code
SACRAMENTO	CA	95864

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.115813**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**AGNES V ANDERSON**

Mailing Address 890 WIXFORD WAY

City	State	Zip Code
SACRAMENTO	CA	95864

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.115814**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**ALLAN ANDERSON**

Mailing Address 501 VERADO VISTA

City	State	Zip Code
LA CANADA FLINTRIDGE	CA	91011

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ARENT FOX

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115816**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ALLEN ANDERSON**

Mailing Address 1303 CHICKERING RD

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

C

Name of Employer  
TOA

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115818**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**CLARK ANDERSON**

Mailing Address S187 W7040 GOLDDRIVE

City	State	Zip Code
MUSKEGO	WI	53150

FEC ID number of contributing federal political committee.

C

Name of Employer  
ACM FIRE PROTECTION INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.115820**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Amount of Each Receipt this Period

225.00

☐ Memo Item

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

**CURTIS ANDERSON**

Mailing Address 1 N STADIUM WAY

City	State	Zip Code
TACOMA	WA	98403

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115822**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

975.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DANA ANDERSON**

Mailing Address 100 FALL CREEK ROAD

City	State	Zip Code
LAWRENCE	KS	66049

FEC ID number of contributing federal political committee.

C

Name of Employer  
MACERICH

Occupation  
REAL ESTAT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115824**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**DOLORES ANDERSON**

Mailing Address 202 SCABOROUGH DRIVE  
G

City	State	Zip Code
GREER	SC	00000

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115826**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			23			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**ED ANDERSON**

Mailing Address 1054 ABBIE LANE

City	State	Zip Code
EUGENE	OR	97401

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115828**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1250.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**EILEEN ANDERSON**

Mailing Address **18837 KRISTIE LANE**

City **EDEN PRAIRIE,** State **MN** Zip Code **55346**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NOT EMPLOYED**

Occupation  
**NOT EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.115830**

Date of Receipt

**06 / 21 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

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

**JAMES M ANDERSON**

Mailing Address **24149 CEDAR ROAD**

City **LYNDHURST** State **OH** Zip Code **44122**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CASE WESTERN RESERVE UNIVERSITY**

Occupation  
**TEACHER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.115832**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**JAMES L ANDERSON**

Mailing Address **8 AUBURN AVE SE**

City **NORTH CANTON** State **OH** Zip Code **44709**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.115834**

Date of Receipt

**09 / 16 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**JOE H ANDERSON**

Mailing Address **PO BOX 36**

City	State	Zip Code
<b>OLD TOWN</b>	<b>FL</b>	<b>32680</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.115836**

Date of Receipt

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

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**JOHN R ANDERSON**

Mailing Address **330 SPRING CREEK RD**

City	State	Zip Code
<b>ROCKFORD</b>	<b>IL</b>	<b>61107</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SPRING CREEK PARTNERS**

Occupation  
**VENTURE CAPITALIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.115838**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

**LANG ANDERSON**

Mailing Address **2530 S 20TH STREET**

City	State	Zip Code
<b>LINCOLN</b>	<b>NE</b>	<b>68502</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.115839**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	5

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3300.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LINDA ANDERSON**

Mailing Address 330 SPRING CREEK RD

City	State	Zip Code
ROCKFORD	IL	61107

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.115841**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**PHILIP ANDERSON**

Mailing Address 4706 8TH RD S

City	State	Zip Code
ARLINGTON	VA	22204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
U.S. NAVY

Occupation  
DOD FEDERAL EMPLOYEE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115843**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**ROBERT ANDERSON**

Mailing Address 40 VILLAGE GREEN E

City	State	Zip Code
PINEHURST	NC	28374

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115845**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**RITA K ANDIS**

Mailing Address 5315 WIND POINT ROAD

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.115847**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**PAUL ANDREWS**

Mailing Address 2441 NORTHEAST PKWY

City	State	Zip Code
FORT WORTH	TX	76106

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TTI, INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115849**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**REYNELL ANDREWS**

Mailing Address PO BOX 30308

City	State	Zip Code
ELMONT	NY	11003

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115851**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**TIMOTHY ANDRINGA**

Mailing Address 1637 LEGEND HILL LANE

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

C

Name of Employer  
CRAMER, MULHAUF & HAMMES, LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.115853**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**GLENN ANGIOLILLO**

Mailing Address PO BOX 128

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

C

Name of Employer  
GJA MANAGEMENT CORP

Occupation  
ASSET MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.115855**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**JEAN ANGLE**

Mailing Address 35 E VIA VERDEST

City	State	Zip Code
WICHITA	KS	67230

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.115857**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 47 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

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

JEAN ANGLE

Mailing Address 35 E VIA VERDEST

City	State	Zip Code
WICHITA	KS	67230

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Transaction ID : SA17A.115858

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

500.00

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

RAY ANNTONNEAU

Mailing Address 1300 S GREEN BAY ROAD

City	State	Zip Code
MOUNT PLEASANT	WI	53406

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.115860

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			21			2015			

Amount of Each Receipt this Period

1000.00

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

FRED ANTHONY

Mailing Address PO BOX 1055

City	State	Zip Code
ROSWELL	GA	30077

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.119868

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1600.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JAMES ANTHONY**

Mailing Address 702 OBERLIN ROAD, #400

City	State	Zip Code
RALEIGH	NC	27605

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ANTHONY & CO**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119870**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**ERIC ANTON**

Mailing Address 7 PARK AVENUE, APT 16

City	State	Zip Code
NEW YORK	NY	10016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HHF**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119872**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**ANDREW ANTROBUS**

Mailing Address 38 SOUTHPORT WOODS DR

City	State	Zip Code
SOUTHPORT	CT	06890

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PFIZER, INC**

Occupation  
**GOVT RELATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

201.00

**Transaction ID : SA17A.119874**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

201.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3901.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**CAROLE ANZIVINO**

Mailing Address 4714 CADIZ CIR

City	State	Zip Code
PALM BEACH GA	FL	33418

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.119875**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 06 / 2015

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**EDWARD APRAHAMIAN**

Mailing Address 19160 GLEN KERRY DR

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

C

Name of Employer  
LEZK

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119877**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**R. L ARCHBALD**

Mailing Address 815 MANCHESTER WOODS DR

City	State	Zip Code
SUN CITY CENT	FL	33573

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.119878**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1325.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**VAN HENR ARCHER**

Mailing Address **218 W LYNWOOD AVE**

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RANCHING AND INVESTMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.119880**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**WILLIAM ARDREY**

Mailing Address **P.O. BOX 1013**

City	State	Zip Code
LANCASTER	SC	29721

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BILL ADREY FORESTRY INC.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.119881**

Date of Receipt

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

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

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

**JOHN AREND**

Mailing Address **6303 E 108TH STREET**

City	State	Zip Code
TULSA	OK	74137

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.119883**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1700.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MARC ARGINTEANU**

Mailing Address 32 ADAMS DRIVE

City	State	Zip Code
CRESSKILL	NJ	07626

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119885**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**DANIEL T ARIENS**

Mailing Address 655 W RYAN ST

City	State	Zip Code
BRILLION	WI	54110

FEC ID number of contributing federal political committee.

C

Name of Employer  
ARIENS COMPANY

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119887**

Date of Receipt

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

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**MARY ARIENS**

Mailing Address N7449 ROUND LAKE ROAD

City	State	Zip Code
BRILLION WISCONSIN	WI	54110

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119889**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WILLIAM D ARMISTEAD**

Mailing Address 11066 CASHMERE STREET

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.119890**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**JEFFREY ARMOUR**

Mailing Address 20320 SW BIRCH STREET, STE 110

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

C

Name of Employer  
ARMOUR PROPERTIES

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.119892**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

1250.00

☐ Memo Item

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

**BRIAN ARMSTRONG**

Mailing Address 5657 S MELINDA ST

City	State	Zip Code
MILWAUKEE	WI	53221

FEC ID number of contributing federal political committee.

C

Name of Employer  
ARMSTRONG CONSTRUCTION

Occupation  
BUSINESS OWNER OF CONSTRUCTION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119894**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KAREN ARMSTRONG**

Mailing Address 5657 S MELINDA ST

City	State	Zip Code
MILWAUKEE	WI	53221

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CARE GIVER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.119896**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

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

**KAREN ARMSTRONG**

Mailing Address 5657 S MELINDA ST

City	State	Zip Code
MILWAUKEE	WI	53221

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CARE GIVER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119897**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**ALAN ARNOLD**

Mailing Address 2 FRIAR LN

City	State	Zip Code
LADERA RANCH	CA	92694

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**VISION SOLUTIONS, INC.**

Occupation  
**CTO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119899**

Date of Receipt

**07** / **16** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**CLAYTON ARNOLD**

Mailing Address 11430 MAIN

City	State	Zip Code
ROSCOE	IL	61073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**OWNER**

Occupation  
**LANDSCAPE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119901**

Date of Receipt

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

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**DAN ARNOLD**

Mailing Address 57450 EAST HIGHWAY 1  
M

City	State	Zip Code
MONKEY ISLAND	MO	00000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119903**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**DANIEL ARNOLD**

Mailing Address 4930 E STATE STREET

City	State	Zip Code
ROCKFORD	IL	61108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROAD RANGER LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119905**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DANIEL ARNOLD**

Mailing Address 4930 E STATE STREET

City	State	Zip Code
ROCKFORD	IL	61108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROAD RANGER LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.119906**

Date of Receipt

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

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**DANIEL ARNOLD**

Mailing Address 4930 E STATE STREET

City	State	Zip Code
ROCKFORD	IL	61108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROAD RANGER LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119907**

Date of Receipt

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

REATTRIBUTION TO LINDA ARNOLD

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**DANIEL ARNOLD**

Mailing Address 4930 E STATE STREET

City	State	Zip Code
ROCKFORD	IL	61108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROAD RANGER LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.119908**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**DANIEL ARNOLD**

Mailing Address **4930 E STATE STREET**

City	State	Zip Code
ROCKFORD	IL	61108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ROAD RANGER LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.119908.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

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

**DANIEL ARNOLD**

Mailing Address **4930 E STATE STREET**

City	State	Zip Code
ROCKFORD	IL	61108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ROAD RANGER LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.119908.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

**RESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

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

**LINDA J ARNOLD**

Mailing Address **2004 EL RANCHO LANE**

City	State	Zip Code
ROCKFORD	IL	61110

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.119910**

Date of Receipt

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

**REATTRIBUTION FROM DANIEL ARNOLD**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**0.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**ROBERT ARNOLD**

Mailing Address **N6202 FOSTER RD**

City <b>ELKHORN</b>	State <b>WI</b>	Zip Code <b>53121</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.119911**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

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

**ROBERT ARNOLD**

Mailing Address **N6202 FOSTER RD**

City <b>ELKHORN</b>	State <b>WI</b>	Zip Code <b>53121</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**245.00**

**Transaction ID : SA17A.119912**

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

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

**ROBERT ARNOLD**

Mailing Address **N6202 FOSTER RD**

City <b>ELKHORN</b>	State <b>WI</b>	Zip Code <b>53121</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**280.00**

**Transaction ID : SA17A.119913**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**160.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LORI ARNONE**

Mailing Address 3313 MICHAEL DRIVE

City	State	Zip Code
CLARKSTON	WA	99403

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119915**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**HENRY ARRINGTON**

Mailing Address 301 BELLA DR

City	State	Zip Code
METAIRIE	LA	70005-4123

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119916**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**MARY ELLEN ARTHUR**

Mailing Address 1126 CARTER RD.

City	State	Zip Code
RIDGEVILLE	SC	29472

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119918**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**BONNIE ARTIGAS**

Mailing Address 2270 SANDERLING LN

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119920**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**BONNIE ARTIGAS**

Mailing Address 2270 SANDERLING LN

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119921**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**CATHLEEN ASBELL**

Mailing Address P.O. BOX 26

City	State	Zip Code
NORTHFIELD	VT	05663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.119923**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RIVER VALLEY CLUB

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119925**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RIVER VALLEY CLUB

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.119926**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	5

CHARGED BACK

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RIVER VALLEY CLUB

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.119927**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	5

CHARGED BACK

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
RIVER VALLEY CLUBOccupation  
OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.119928**

Date of Receipt

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

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
RIVER VALLEY CLUBOccupation  
OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119929**

Date of Receipt

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

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
RIVER VALLEY CLUBOccupation  
OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.119930**

Date of Receipt

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

**SEE REATTRIBUTION**

Amount of Each Receipt this Period

2700.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

-2700.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ELIZABETH ASCH**

Mailing Address 12 WOODROW ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RIVER VALLEY CLUB

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119930.0**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**JOE ASCH**

Mailing Address 12 WOODROW RD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RIVER VALLEY CLUB

Occupation  
FITNESS CLUB

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119930.1**

Date of Receipt

**08 / 10 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**LONDON E ASH**

Mailing Address 2201 LANE PARK ROAD

City	State	Zip Code
MOUNTAIN BROO	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EXTREME CONCEPTS

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119932**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address 1222 CAMP AVE

City State Zip Code  
MOUNT DORA FL 32757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PLASTIC COMPOSITES, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119934**

Date of Receipt

M M / D D / Y Y Y Y  
07 24 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Mailing Address 754 SOUTH TOMAHAWK

City State Zip Code  
STURGEON BAY WI 54235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119936**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address S2520 TOWN SHOP RD

City State Zip Code  
FALL CREEK WI 54742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119938**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WADE ASHER**

Mailing Address 3306 WHITE OAK LANE

City	State	Zip Code
EAU CLAIRE	WI	54703

FEC ID number of contributing federal political committee.

C

Name of Employer  
CVMF

Occupation  
GENERAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119940**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**ANNE ATHERTON**

Mailing Address 1723 COTTONWOOD DRIVE

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119942**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**SCOTT ATKINSON**

Mailing Address 5804 STILL FOREST DR

City	State	Zip Code
DALLAS	TX	75252

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119944**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ROBERT B ATWELL**

Mailing Address **3486 SOLITUDE RD**

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NICOLET NATIONAL BANK**

Occupation  
**BANKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.119946**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

**ROBERT AUBURN**

Mailing Address **4401 TOWHEE DRIVE NW**

City	State	Zip Code
GIG HARBOR	WA	98332

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.119948**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**BRETT AUGUST**

Mailing Address **399 FULLERTON PARKWAY**

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PATTISHALL MCAULIFFE**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.119950**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3450.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**BRETT AUGUST**

Mailing Address **399 FULLERTON PARKWAY**

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PATTISHALL MCAULIFFE**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**285.00**

**Transaction ID : SA17A.119951**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

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

**BURTON AUGUST**

Mailing Address **21 PICCADILLY SQUARE**

City	State	Zip Code
ROCHESTER	NY	14625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.119953**

Date of Receipt

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

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**GRETCHEN AUGUSTYN**

Mailing Address **3116 N ROCKMONT AVE**

City	State	Zip Code
CLAREMONT	CA	91711

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**503.00**

**Transaction ID : SA17A.119955**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

**503.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1538.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MICHAEL AURELIO**

Mailing Address 59 WOODVIEW LN

City	State	Zip Code
LEMONT	IL	60439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Lemont-Bromberek Combined School Distr

Occupation  
SCHOOL BOARD PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.119957**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**ERRICO AURICCHIO**

Mailing Address 337 GREENE AVENUE

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BELGIOIOSO CHEESE

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.119959**

Date of Receipt

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

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

**PENNYLYN AUSMUS**

Mailing Address PO BOX 63336

City	State	Zip Code
PIPE CREEK	TX	78063

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119961**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2550.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JOHN F AVERY III**

Mailing Address 4261 NE MEADOW CREEK CI

City	State	Zip Code
FAYETTEVILLE	AR	72703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RICH PRODUCTS

Occupation  
REGIONAL SALES MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119963**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**HERB AYDELOTT**

Mailing Address 981 EAGLE RUN DR

City	State	Zip Code
CENTERVILLE	OH	45458

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AYDELOTT EQUIPMENT, INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119965**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**MARIAM AZARM**

Mailing Address 419 EAST 57TH STREET #16AB

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Gila

Occupation  
Worker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119967**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**RICHARD BAALMANN**

Mailing Address 11743 MANCHESTER ROAD

City	State	Zip Code
ST. LOUIS	MO	63131

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BRAMM INC.**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.119969**

Date of Receipt

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

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

**CHARLES BABB**

Mailing Address 201 S BLACK FOREST CIRC

City	State	Zip Code
PRESCOTT	AZ	86303

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

338.00

**Transaction ID : SA17A.119970**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

188.00

☐ Memo Item

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

**EDWARD A BABKA**

Mailing Address 1835 LINKS GLEN DR

City	State	Zip Code
DUBUQUE	IA	52003

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119972**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2688.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**PATRICK BACHRODT**

Mailing Address 7070 CHERRYVALE N. BLVD

City	State	Zip Code
ROCKFORD	IL	61112

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BACHRODT AUTO MALL

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119974**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**H. L BACIGALUPI**

Mailing Address 4151 WESTSIDE RD

City	State	Zip Code
HEALDSBURG	CA	95448

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119976**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**WILLIAM BACKLUND**

Mailing Address 23736 NE 116 PLACE

City	State	Zip Code
REDMOND	WA	98053

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.119977**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2050.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WILLIAM BACKLUND**

Mailing Address 23736 NE 116 PLACE

City	State	Zip Code
REDMOND	WA	98053

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.119978**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**WILLIAM BACKLUND**

Mailing Address 23736 NE 116 PLACE

City	State	Zip Code
REDMOND	WA	98053

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.119979**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**FRANK BAGATTA**

Mailing Address 823 WEST JERICO TURNPIKE

City	State	Zip Code
SMITHTOWN	NY	11787

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INSURANCE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119981**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address 705 S STATE ST.

City	State	Zip Code
HAMPSHIRE	IL	60140

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119983**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address 5927 S CREEKSIDE CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.119984**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Mailing Address 5927 S CREEKSIDE CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

**Transaction ID : SA17A.119985**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WALTER BAHLER**

Mailing Address 5927 S CREEKSIDE CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : SA17A.119986**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**WALTER BAHLER**

Mailing Address 5927 S CREEKSIDE CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.00

**Transaction ID : SA17A.119987**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**WALTER BAHLER**

Mailing Address 5927 S CREEKSIDE CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

**Transaction ID : SA17A.119988**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

75.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WALTER BAHLER**

Mailing Address 5927 S CREEKSID CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

395.00

**Transaction ID : SA17A.119989**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**WALTER BAHLER**

Mailing Address 5927 S CREEKSID CT

City	State	Zip Code
REMINGTON	IN	47977

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

405.00

**Transaction ID : SA17A.119990**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**MATTHEW S BAILEY**

Mailing Address 4915 S RANGE RD

City	State	Zip Code
NORTH JUDSON	IN	46366

FEC ID number of contributing federal political committee.

C

Name of Employer  
BAILEYTOWN INC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.119992**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

520.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MATTHEW S BAILEY**

Mailing Address 4915 S RANGE RD

City	State	Zip Code
NORTH JUDSON	IN	46366

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BAILEYTOWN INC**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.119993**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**MONA BAILEY**

Mailing Address 6200 LAKE WAY

City	State	Zip Code
NORTH RICHLAN	TX	76180

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.119995**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**STANLEY BAILEY**

Mailing Address 4105 OLD HWY 395 N.

City	State	Zip Code
CARSON CITY	NV	89704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.119996**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		16		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3350.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

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

WARREN W BAILEY

Mailing Address 800 W PEAK VISTA PL

City	State	Zip Code
TUCSON	AZ	85737

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Transaction ID : SA17A.119998

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

1200.00

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

WARREN W BAILEY

Mailing Address 800 W PEAK VISTA PL

City	State	Zip Code
TUCSON	AZ	85737

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Transaction ID : SA17A.119999

Date of Receipt

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

Amount of Each Receipt this Period

50.00

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

WILLIAM C BAIN

Mailing Address 2842 GENTLE HILLS COURT

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

C

Name of Employer  
VOS ELECTRIC INCOccupation  
ELECTRICIAN /OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.120001

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1500.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**HARVEY BAIRD**

Mailing Address **216 GRANDVIEW DRIVE**

City <b>HUDSON</b>	State <b>WI</b>	Zip Code <b>54016</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120003**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 31 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

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

**CAROL BAKER**

Mailing Address **9928 SPIREHAVEN LANE**  
**D**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>00000</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120005**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 23 / 2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**DAVID BAKER**

Mailing Address **2237 SE BANDERA CT**

City <b>PORT ORCHARD</b>	State <b>WA</b>	Zip Code <b>98367</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PARATRANSIT SERVICES**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120007**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 14 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DAVID BAKER**

Mailing Address 6978 GREENBROOK CIRCLE

City	State	Zip Code
CITRUS HEIGHTS	CA	95621

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Ctcnc

Occupation  
Union Carpenter

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120009**

Date of Receipt

**07** / **31** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**MAX BAKER**

Mailing Address 7818 YORKTOWN ROAD

City	State	Zip Code
FORT MITH	AR	72904

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BAKER BEHAVIORAL CONSULTANTS INC

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120011**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**RICHARD BAKER**

Mailing Address N5128 COUNTY ROAD G

City	State	Zip Code
SAINT CLOUD	WI	53079

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BAKER CHEESE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120013**

Date of Receipt

**08** / **17** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **13 HEATHER RD**

City	State	Zip Code
WATERTOWN	MA	02472

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ENTREPRENEUR**

Occupation  
**ENTREPRENEUR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120015**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

Mailing Address **6644 WHISPERING WOOD**

City	State	Zip Code
PLANO	TX	75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KPMG**

Occupation  
**ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120017**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

Mailing Address **6644 WHISPERING WOOD**

City	State	Zip Code
PLANO	TX	75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KPMG**

Occupation  
**ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**505.00**

**Transaction ID : SA17A.120018**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

**5.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1505.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**HELEN BAKKE**

Mailing Address PO BOX 45858

City	State	Zip Code
MADISON	WI	53744

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120020**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**HELEN BAKKE**

Mailing Address PO BOX 45858

City	State	Zip Code
MADISON	WI	53744

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2803.00

**Transaction ID : SA17A.120021**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Amount of Each Receipt this Period

103.00

☐ Memo Item

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

**RONALD BAKOOVER**

Mailing Address 7510 STONECLIFF CIRCLE

City	State	Zip Code
AUSTIN	TX	78731

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120023**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3103.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DAVID J BALDOVIN**

Mailing Address 205 LAKE COURT DR

City	State	Zip Code
LYNCHBURG	TN	37352

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120025**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**JULIE BALDRIDGE**

Mailing Address PO BOX 607

City	State	Zip Code
WHITEFISH	MT	59937

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120027**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**GEORGE BALICH**

Mailing Address 28 PRINCE STREET

City	State	Zip Code
BEVERLY	MA	01915

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120029**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KATHLEEN BALISTRERI**

Mailing Address **618 STONEGATE PASS**

City	State	Zip Code
COLGATE	WI	53017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120031**

Date of Receipt

**07 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

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

**KATHLEEN BALISTRERI**

Mailing Address **618 STONEGATE PASS**

City	State	Zip Code
COLGATE	WI	53017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120032**

Date of Receipt

**07 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**MAUREEN BALISTRERI**

Mailing Address **3416 W RIVERLAND DRIVE**

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Homemaker**

Occupation  
**Homemaker**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120034**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**SALVATOR BALISTRERI**

Mailing Address **5080 CONCORA ROAD**

**B**

City

**BOULDER JUNCT**

State

**WI**

Zip Code

**00000**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120036**

Date of Receipt

**07**

**23**

**2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**THOMAS BALISTRERI**

Mailing Address **618 STONEGATE PASS**

City

**COLGATE**

State

**WI**

Zip Code

**53017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2800.00**

**Transaction ID : SA17A.120037**

Date of Receipt

**07**

**14**

**2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

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

**THOMAS BALISTRERI**

Mailing Address **618 STONEGATE PASS**

City

**COLGATE**

State

**WI**

Zip Code

**53017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120038**

Date of Receipt

**07**

**14**

**2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**-100.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**THOMAS BALISTRERI**

Mailing Address **618 STONEGATE PASS**

City	State	Zip Code
COLGATE	WI	53017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2800.00**

**Transaction ID : SA17A.120039**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

**100.00**

☒ Memo Item

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

**WILLIAM "MIKE" BALLARD**

Mailing Address **656 GOOD SPRINGS RD.**

City	State	Zip Code
BRENTWOOD	TN	37027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NATIONAL SEATING & MOBILITY**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120041**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

**SANDY BALLOU**

Mailing Address **108 N GREEN BAY RD**

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120043**

Date of Receipt

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

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2700.00**

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JAMES BALLOUN**

Mailing Address 2540 WOODWARD WAY NW

City	State	Zip Code
ATLANTA	GA	30305

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120045**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**HERBERT BALTER**

Mailing Address 33 SUNSET AVE

City	State	Zip Code
VENICE	CA	90291

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.120046**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**CLYDE BALVANZ**

Mailing Address 302 STEWART STREET

City	State	Zip Code
PLAINFIELD	IA	50666

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120048**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1275.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JEANIE BALZER**

Mailing Address 949 DEVER ROAD

City	State	Zip Code
LUCASVILLE,	OH	45648

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120050**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**MARK W BANKS**

Mailing Address 4461 WATERS EDGE LN

City	State	Zip Code
SANIBEL	FL	33957

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120052**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**RICHARD BANKS**

Mailing Address PO BOX 5146

City	State	Zip Code
SANTA BARBARA	CA	93150

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120054**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**J. A BANNISTER**

Mailing Address 115 RYE RIDGE RD

City  
HARRISON

State Zip Code  
NY 10528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GIBSON, DUNN & CRUTCHER

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120056**

Date of Receipt

M M / D D / Y Y Y Y  
08 07 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**JOYCE BANT**

Mailing Address 6937 HWY 51

City  
HAZELHURST

State Zip Code  
WI 54531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.120057**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**JOYCE BANT**

Mailing Address 6937 HWY 51

City  
HAZELHURST

State Zip Code  
WI 54531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

378.00

**Transaction ID : SA17A.120058**

Date of Receipt

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

Amount of Each Receipt this Period

103.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1203.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**BRAD BANTA**

Mailing Address 1409 MIDDLE RIVER DRIVE

City	State	Zip Code
FORT LAUDERDALE	FL	33304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BANTA PROPERTIES, INC.,

Occupation  
REAL ESTATE INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120060**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**MARK A BANZ**

Mailing Address 3795 HERMITAGE TRL

City	State	Zip Code
ROCKFORD	IL	61114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PEAK FITNESS

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120062**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**HENRY BAR-LEVAV**

Mailing Address 1388 OCEAN PARKWAY

City	State	Zip Code
BROOKLYN	NY	11230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120064**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**FRANK BARBER**

Mailing Address **1894 SCARLET OAK TRL**

City **OSHKOSH** State **WI** Zip Code **54904**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120066**

Date of Receipt

**06** / **19** / **2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

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

**ALFRED BARBOUR**

Mailing Address **155 DARLINGTON LANE**

City **SEWICKLEY** State **PA** Zip Code **15143**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CONCAST**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.120068**

Date of Receipt

**08** / **14** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

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

**ALFRED BARBOUR**

Mailing Address **155 DARLINGTON LANE**

City **SEWICKLEY** State **PA** Zip Code **15143**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CONCAST**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120069**

Date of Receipt

**08** / **14** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5650.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

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

ALFRED BARBOUR

Mailing Address 155 DARLINGTON LANE

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing federal political committee.

C

Name of Employer  
CONCASTOccupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120070**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

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

MARY E BARBOUR

Mailing Address 155 DARLINGTON LANE

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4400.00

**Transaction ID : SA17A.120072**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

4400.00

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

MARY E BARBOUR

Mailing Address 155 DARLINGTON LANE

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2200.00

**Transaction ID : SA17A.120073**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2200.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

4400.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MARY E BARBOUR**

Mailing Address 155 DARLINGTON LANE

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4400.00

**Transaction ID : SA17A.120074**

Date of Receipt

**08 / 14 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2200.00

☒ Memo Item

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

**KRIS BARCELOW**

Mailing Address 7436 SHANNON DR.

City	State	Zip Code
EDINA	MN	55439

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120076**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**SHAUNA BARGER**

Mailing Address 945 SAN MARINO AVE

City	State	Zip Code
SAN MARINO	CA	91108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CHOREOGRAPHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120078**

Date of Receipt

**07 / 06 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JOHN BARKER**

Mailing Address 4812 96TH STREET

City	State	Zip Code
LUBBOCK	TX	79423

FEC ID number of contributing federal political committee.

C

Name of Employer  
COVENANT HEALTH

Occupation  
DIRECTOR OF SECURITY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120080**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JON M BARKER**

Mailing Address RR 1 BOX 127

City	State	Zip Code
BROUGHTON	IL	62817

FEC ID number of contributing federal political committee.

C

Name of Employer  
THE BAKER COMPANIES

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**JON M BARKER**

Mailing Address RR 1 BOX 127

City	State	Zip Code
BROUGHTON	IL	62817

FEC ID number of contributing federal political committee.

C

Name of Employer  
THE BAKER COMPANIES

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120083**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

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

SANDRA G BARKER

Mailing Address 115 QUIET LN

City	State	Zip Code
HAZEL GREEN	AL	35750

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Transaction ID : SA17A.120085

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

225.00

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

SANDRA G BARKER

Mailing Address 115 QUIET LN

City	State	Zip Code
HAZEL GREEN	AL	35750

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Transaction ID : SA17A.120086

Date of Receipt

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

Amount of Each Receipt this Period

225.00

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

TIMOTHY BARNARD

Mailing Address PO BOX 99

City	State	Zip Code
BOZEMAN	MT	59771

FEC ID number of contributing federal political committee.

C

Name of Employer  
BARNARD CONSTRUCTIONOccupation  
CHAIRMAN FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.120088

Date of Receipt

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

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1450.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BOBBY L BARNES**

Mailing Address 15 SILVERCREEK LN

City	State	Zip Code
BALLWIN	MO	63011

FEC ID number of contributing federal political committee.

C

Name of Employer  
MEDISTAFF

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120090**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**HERBERT BARNES**

Mailing Address 1844 MONTEREY RD

City	State	Zip Code
SOUTH PASADEN	CA	91030

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120092**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**MICHAEL BARNES**

Mailing Address 774 MAYS BLVD

1

City	State	Zip Code
INCLINE VILLA	NV	89451

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120093**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1400.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MICHAEL BARNES**

Mailing Address **774 MAYS BLVD**

**1**

City

**INCLINE VILLA**

State

**NV**

Zip Code

**89451**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.120094**

Date of Receipt

**08**

**07**

**2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

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

**MICHAEL BARNES**

Mailing Address **774 MAYS BLVD**

**1**

City

**INCLINE VILLA**

State

**NV**

Zip Code

**89451**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.120095**

Date of Receipt

**08**

**19**

**2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

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

**MICHAEL BARNES**

Mailing Address **774 MAYS BLVD**

**1**

City

**INCLINE VILLA**

State

**NV**

Zip Code

**89451**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**425.00**

**Transaction ID : SA17A.120096**

Date of Receipt

**09**

**11**

**2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**125.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **774 MAYS BLVD**  
**1**

City State Zip Code  
**INCLINE VILLA NV 89451**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00**

**Transaction ID : SA17A.120097**

Date of Receipt

**09 / 16 / 2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

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

Mailing Address **38 FOX HILL ST.**

City State Zip Code  
**WESTWOOD MA 02090**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120099**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

Mailing Address **38 FOX HILL STREET**

City State Zip Code  
**WESTWOOD MA 02090**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WILMER CUTLER PICKERING HALE AND  
DORR**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120101**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5425.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PAUL BARNETT**

Mailing Address 1576 BRAE BURN CT

City	State	Zip Code
RIVERWOODS	IL	60015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PRINCIPAL MANUFACTURING CORP**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120103**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**NANCY BARNHART**

Mailing Address 7370 WALSH RD

City	State	Zip Code
MILLINGTON	TN	38053

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120105**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**MARTHA BARRETT**

Mailing Address 33 OLD WAGON RD

City	State	Zip Code
OLD GREENWICH	CT	06870

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120107**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address 1232 N EDISON ST

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CASSIDY, TURLEY, BARRY, INC.

Occupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120109**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

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

Mailing Address 1232 N EDISON ST

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CASSIDY, TURLEY, BARRY, INC.

Occupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120110**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

Mailing Address 1232 N EDISON ST

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CASSIDY, TURLEY, BARRY, INC.

Occupation  
REALTOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120111**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

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

JERRI BARRY

Mailing Address 968 EVERGREEN LANE

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120113**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

500.00

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

PETER J BARTELL

Mailing Address 15208 W SAN MATEO DR

City	State	Zip Code
NEW BERLIN	WI	53151

FEC ID number of contributing federal political committee.

C

Name of Employer  
A&B FILLING INCOccupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120115**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

500.00

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

RICHARD BARTOSIC

Mailing Address 2235 W JONATHON DR

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

C

Name of Employer  
ALPHA-PRIME, INCOccupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120117**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **PO BOX 372**

City State Zip Code  
**LAC DU FLAMBEAU WI 54538**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**210.00**

**Transaction ID : SA17A.120119**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**210.00**

☐ Memo Item

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

Mailing Address **4316 SAINT JOHNS DR**

City State Zip Code  
**DALLAS TX 75205**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120121**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

Mailing Address **15301 DALLAS PKWY, STE 1100**

City State Zip Code  
**ADDISON TX 75001**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SYSTEMWARE, INC.**

Occupation  
**MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120123**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1210.00**

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ROCHELLE H BAST**

Mailing Address 3704 N LAKE DR

City

SHOREWOOD

State

WI

Zip Code

53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RITEWAY BUS SERVICE, INC.

Occupation

BUSINESS OWNER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.120125**

Date of Receipt

07

23

2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

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

**ROCHELLE H BAST**

Mailing Address 3704 N LAKE DR

City

SHOREWOOD

State

WI

Zip Code

53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RITEWAY BUS SERVICE, INC.

Occupation

BUSINESS OWNER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

425.00

**Transaction ID : SA17A.120126**

Date of Receipt

08

11

2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**THOM BATCHELDER**

Mailing Address 190 HOLLY COURT

City

LOGANVILLE

State

GA

Zip Code

30052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120127**

Date of Receipt

09

09

2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

525.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JILL BATEMAN**

Mailing Address 12797 S KERI LYNN CT

City	State	Zip Code
RIVERTON	UT	84065

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.120128**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**STEPHEN J BATES**

Mailing Address 197 TOBY GARDEN ST

City	State	Zip Code
DUXBURY	MA	02332

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SCM ASSOCIATES

Occupation  
SENIOR VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120130**

Date of Receipt

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

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**WILLIAM BATISTE**

Mailing Address 725 KAPIOLANI BLVD

City	State	Zip Code
HONOLULU	HI	96813

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120132**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ROBIN BATTEN**

Mailing Address 1263 PENFIELD LANE

City	State	Zip Code
CHARLOTTESVILLE	VA	22901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**DESIGNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120134**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

**MARK BAUDER**

Mailing Address 605 SUMMIT ST.

City	State	Zip Code
RICHLAND	WA	99352

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**AG.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120136**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JERRY BAUER**

Mailing Address PO BOX 248

City	State	Zip Code
DURAND	WI	54736

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BAUER BUILD, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120138**

Date of Receipt

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

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3300.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**SCOTT BAUGH**

Mailing Address 4040 MACARTHUR

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SCOTT BAUGH & ASSOCIATES**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120140**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**GERALD BAUMAN**

Mailing Address 19525 57TH AVE

City	State	Zip Code
CHIPPEWA FALL	WI	54729

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BAUMAN CONSTRUCTION**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120142**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**ROBERT BAUMAN**

Mailing Address 118 ROUND BAY RD

City	State	Zip Code
SEVERNA PARK	MD	21146

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRUSTED SYSTEMS**

Occupation  
**BUSINESS MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.120143**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

110.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

860.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LINDA A BAUMBACH**

Mailing Address 4528 N KNOLLWOOD LN

City	State	Zip Code
APPLETON	WI	54913

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TITAN CONVEYORS**

Occupation  
**TRANSPORTATION COORDINATOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120145**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**FRANK BAXTER**

Mailing Address 11100 SANTA MONICA BOUL

City	State	Zip Code
LOS ANGELES	CA	90025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120147**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

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

**FRANK BAXTER**

Mailing Address 11100 SANTA MONICA BOUL

City	State	Zip Code
LOS ANGELES	CA	90025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120148**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KATHRINE F BAXTER**

Mailing Address 11100 SANTA MONICA B  
S

City State Zip Code  
LOS ANGELES CA 90025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120150**

Date of Receipt

M M / D D / Y Y Y Y  
07 06 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**SHAYNETTE BAXTER**

Mailing Address 6734 N GULLWING CT

City State Zip Code  
APPLETON WI 54913

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120152**

Date of Receipt

M M / D D / Y Y Y Y  
07 22 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**SHAYNETTE BAXTER**

Mailing Address 6734 N GULLWING CT

City State Zip Code  
APPLETON WI 54913

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

760.00

**Transaction ID : SA17A.120153**

Date of Receipt

M M / D D / Y Y Y Y  
07 28 2015

Amount of Each Receipt this Period

260.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

760.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**SHAYNETTE BAXTER**

Mailing Address **6734 N GULLWING CT**

City	State	Zip Code
APPLETON	WI	54913

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1010.00**

**Transaction ID : SA17A.120155**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

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

**STUART BAXTER**

Mailing Address **14N456 FACTLY RD**

City	State	Zip Code
SYCAMORE	IL	60178

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SUBURBAN PLASTICS COMPANY**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.120156**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

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

**CAROL C BAYERLEIN**

Mailing Address **1810 WEDGEWOOD DR E**

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120158**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1350.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LEE A BEAMAN**

Mailing Address 1525 BROADWAY

City	State	Zip Code
NASHVILLE	TN	37203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BEAMAN AUTOMOTI**

Occupation  
**AUTO DEALE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120160**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**PETER BEANE**

Mailing Address 715 LINCOLN ST

City	State	Zip Code
KEWAUNEE	WI	54216

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120162**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JOHN BEAR**

Mailing Address 300 FRONT STREET

City	State	Zip Code
LITITZ	PA	17543

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STEVENS & LEE**

Occupation  
**MANAGING DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120164**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LORI BEASLEY**

Mailing Address PO BOX 110

City

SUMMERSVILLE

State

MO

Zip Code

65571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.120166**

Date of Receipt

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

Amount of Each Receipt this Period

210.00

☐ Memo Item

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

**SAM BEASLEY**

Mailing Address 6215 PINEVIEW RD

City

DALLAS

State

TX

Zip Code

75248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

GENERAL CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120167**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**ALEXANDR S BECHER**

Mailing Address

City

APPLETON

State

WI

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BECHER SOLUTIONS

Occupation

ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120169**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 22 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3160.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**BENJAMIN J BECHER**

Mailing Address PO BOX 361

City State Zip Code  
APPLETON WI 54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BECHER PLASTICS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120171**

Date of Receipt

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

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

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

**BENJAMIN J BECHER**

Mailing Address PO BOX 361

City State Zip Code  
APPLETON WI 54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BECHER PLASTICS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120172**

Date of Receipt

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

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**BRYANT BECHER**

Mailing Address PO BOX 361

City State Zip Code  
APPLETON WI 54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UW WHITEWATER

Occupation  
STUDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120174**

Date of Receipt

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

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**DEBORAH A BECHER**

Mailing Address **PO BOX 361**

City State Zip Code  
**APPLETON WI 54912**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BECHER SOLUTIONS, INC.**

Occupation  
**OFFICE ADMINISTRATOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120176**

Date of Receipt

**07 / 10 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

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

**MITCHELL BECHER**

Mailing Address **193 E GLENDALE AVE**

City State Zip Code  
**APPLETON WI 54911**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BECHER ENGINEERING**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120178**

Date of Receipt

**07 / 10 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

**CHARLES BECK**

Mailing Address **2700 CENTRAL AVE**

City State Zip Code  
**MIDDLETOWN OH 45044**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.120179**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2800.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JAMES M BECK**

Mailing Address 312 FAIRWAY DR

City	State	Zip Code
COLUMBUS	WI	53925

FEC ID number of contributing federal political committee.

C

Name of Employer  
DRS. BECK & BECK

Occupation  
DENTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120181**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**LISA BECK**

Mailing Address 4204 GROVER DRIVE

City	State	Zip Code
BIRMINGHAM	WI	35213

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120183**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**MARK BECK**

Mailing Address PO BOX 69

City	State	Zip Code
FORT MILL	SC	29716

FEC ID number of contributing federal political committee.

C

Name of Employer  
BRIDGETREE, INC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120185**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ELEANOR BECKETT**

Mailing Address 10357 AVON BELDEN ROAD

City	State	Zip Code
GRAFTON	OH	44044

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120187**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**GEORGE BECKWITH**

Mailing Address 1311 RIVERFRONT DRIVE

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
NA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120189**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**VINCENT BEDARD**

Mailing Address 1614 WINTERCEST STREET

City	State	Zip Code
EAST LANSING	MI	48823

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120190**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5600.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**VINCENT BEDARD**

Mailing Address 1614 WINTERCEST STREET

City	State	Zip Code
EAST LANSING	MI	48823

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.12932**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**VINCENT BEDARD**

Mailing Address 1614 WINTERCEST STREET

City	State	Zip Code
EAST LANSING	MI	48823

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.120191**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**VINCENT BEDARD**

Mailing Address 1614 WINTERCEST STREET

City	State	Zip Code
EAST LANSING	MI	48823

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

**Transaction ID : SA17A.120192**

Date of Receipt

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

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

275.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JAMES J BEDINGER**

Mailing Address **4 SIERRA AVE**

City	State	Zip Code
PIEDMONT	CA	94611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BEDINGER & COMPANY**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120194**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**R BEECHERL**

Mailing Address **POBOX 2502**

City	State	Zip Code
MIDLAND	TX	79702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120196**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

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

**JANICE BEECHICK**

Mailing Address **6410 RALEIGH ST**

City	State	Zip Code
ARVADA	CO	80003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N. METRO COMM SERVICES**

Occupation  
**CAREGIVER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**275.00**

**Transaction ID : SA17A.120197**

Date of Receipt

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

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3350.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**STEPHEN R BEEKER**

Mailing Address 160 COLONIAL DR

City	State	Zip Code
EUTAW	AL	35462

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**MILK DISTRIBUTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120199**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

**MARK C BEHRENS**

Mailing Address 2334 N COLONY AVENUE

City	State	Zip Code
FRANKSVILLE	WI	53126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHNSON BANK**

Occupation  
**EXECUTIVE VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120201**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JEFFREY S BEISCHEL**

Mailing Address 1313 N FRANKLIN PL

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KMC**

Occupation  
**MANAGEMENT -- AD05 - ADMINISTRAT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120203**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**WILLIAM BELCHER**

Mailing Address 431 VIRGINIA AVE

City	State	Zip Code
CAMPBELL	CA	95008

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120204**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**PATRICIA A BELDEN**

Mailing Address 40 SADDLE RIDGE RD

City	State	Zip Code
GLASTONBURY	CT	06033

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120206**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**BRUCE A BELL**

Mailing Address 958 HICKORY AVE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

C

Name of Employer  
BELMARK INC

Occupation  
CHAIRMAN/FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120208**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BRUCE A BELL**

Mailing Address 958 HICKORY AVE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BELMARK INC**

Occupation  
**CHAIRMAN/FOUNDER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120209**

Date of Receipt

**08 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**BRUCE A BELL**

Mailing Address 958 HICKORY AVE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BELMARK INC**

Occupation  
**CHAIRMAN/FOUNDER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120210**

Date of Receipt

**08 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**CAROL BELL**

Mailing Address 958 HICKORY AVENUE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120212**

Date of Receipt

**08 / 07 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**CAROLINE BELL**

Mailing Address 5230 SUNNYSIDE DR

City	State	Zip Code
BONITA	CA	91902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120214**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**DOUGLAS BELL**

Mailing Address 702 ASHLEY CT

City	State	Zip Code
HIGHLAND VILL	TX	75077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120216**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**JAMES D BELL**

Mailing Address 3900 W LE MONT BLVD

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RW BAIRD

Occupation  
INVESTMENT BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120218**

Date of Receipt

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

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PAUL BELLIVEAU**

Mailing Address 9 GOVERNORS WAY

City	State	Zip Code
MADISON	CT	06443

FEC ID number of contributing federal political committee.

C

Name of Employer  
ORACLE ELEVATOR

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120219**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**PAUL BELLIVEAU**

Mailing Address 9 GOVERNORS WAY

City	State	Zip Code
MADISON	CT	06443

FEC ID number of contributing federal political committee.

C

Name of Employer  
ORACLE ELEVATOR

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.120220**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**GUS BENAVIDES**

Mailing Address 281 RIVER COVE ROAD

City	State	Zip Code
HUNTSVILLE	AL	35811

FEC ID number of contributing federal political committee.

C

Name of Employer  
WYLE INC.

Occupation  
ENGINEER / MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120221**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address **281 RIVER COVE ROAD**

City	State	Zip Code
HUNTSVILLE	AL	35811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WYLE INC.**

Occupation  
**ENGINEER / MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**325.00**

**Transaction ID : SA17A.120222**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

Amount of Each Receipt this Period

**75.00**

☐ Memo Item

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

Mailing Address **3200 SHADY BROOK ROAD**  
**P**

City	State	Zip Code
WOODWARD	OK	73801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BENBROOK INS. AGENCY**

Occupation  
**INSURANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**700.00**

**Transaction ID : SA17A.120224**

Date of Receipt

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

Amount of Each Receipt this Period

**700.00**

☐ Memo Item

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

Mailing Address **730 FIFTH AVENUE, 20TH FLOOR**

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.120226**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**6175.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LINCOLN BENET**

Mailing Address 730 FIFTH AVENUE, 20TH FLOOR

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128856**

Date of Receipt

**08 / 18 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**LINCOLN BENET**

Mailing Address 730 FIFTH AVENUE, 20TH FLOOR

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128857**

Date of Receipt

**08 / 18 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**PATRICIA BENET**

Mailing Address 730 5TH AVE FL 20

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120228**

Date of Receipt

**08 / 18 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

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

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

PAGE 123 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****PATRICIA BENET**

Mailing Address 730 5TH AVE FL 20

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128858**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item**B. Full Name (Last, First, Middle Initial)****PATRICIA BENET**

Mailing Address 730 5TH AVE FL 20

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128859**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item**C. Full Name (Last, First, Middle Initial)****CATHERIN BENFIELD**

Mailing Address 849 ISLAND POINT LANE

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
PSYCHOLOGIST

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226.00

**Transaction ID : SA17A.120229**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

50.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**251.00**

**Transaction ID : SA17A.120230**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**286.00**

**Transaction ID : SA17A.120231**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**321.00**

**Transaction ID : SA17A.120232**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**95.00**

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**356.00**

**Transaction ID : SA17A.120233**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**391.00**

**Transaction ID : SA17A.120234**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**426.00**

**Transaction ID : SA17A.120235**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**105.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**461.00**

**Transaction ID : SA17A.120236**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**496.00**

**Transaction ID : SA17A.120237**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**531.00**

**Transaction ID : SA17A.120238**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**105.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**CATHERIN BENFIELD**

Mailing Address **849 ISLAND POINT LANE**

City	State	Zip Code
CHAPIN	SC	29036

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PSYCHOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**541.00**

**Transaction ID : SA17A.120239**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

**10.00**

☐ Memo Item

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

**GARY BENJAMIN**

Mailing Address **PO BOX 843**

City	State	Zip Code
IRON MOUNTAIN	MI	49801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GUNDLACH CHAMPION, INC.**

Occupation  
**VICE-CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.120241**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

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

**THOMAS J BENJAMIN**

Mailing Address **4601 38TH STREET NORTH**

City	State	Zip Code
ARLINGTON	VA	22207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120243**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**463.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**GREGG BENNETT**

Mailing Address 4809 DUNBERRY LN

City	State	Zip Code
EDINA	MN	55435

FEC ID number of contributing federal political committee.

C

Name of Employer  
**BENNETT MATREIAL HANDLING**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120245**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JOHN T BENNETT**

Mailing Address 29 MEADOWLARK LN

City	State	Zip Code
HILTON HEAD	SC	29926

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120246**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**MILFORD BENNETT**

Mailing Address 576 APACHE TRL

City	State	Zip Code
CHATSWORTH	GA	30705

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120247**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

700.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**SANDRA S BENNETT**

Mailing Address PO BOX 409

City  
LA CENTER

State Zip Code  
WA 98629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120249**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**SANDRA S BENNETT**

Mailing Address PO BOX 409

City  
LA CENTER

State Zip Code  
WA 98629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120250**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**STEPHEN BENSON**

Mailing Address 601 OPELIKA RD

City  
AUBURN

State Zip Code  
AL 36830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120252**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MARGARET BENTLEY**

Mailing Address **N1691 SIX CORNERS RD**

City	State	Zip Code
WALWORTH	WI	53184

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KEEFE REAL ESTATE, INC**

Occupation  
**REALTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120254**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**ANNE BENTON**

Mailing Address **P.O. BOX 7551**

City	State	Zip Code
MENLO PARK	CA	94026

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120256**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

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

**DIXON BENZ II**

Mailing Address **3329 LAKE DRIVE**

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BENZ OIL**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120258**

Date of Receipt

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

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2250.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MARY BERARD**

Mailing Address 1445 PLOVER HEIGHTS ROAD

City	State	Zip Code
STEVENS POINT	WI	54482

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

503.00

**Transaction ID : SA17A.120260**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

503.00

☐ Memo Item

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

**ROBERT J BERARD**

Mailing Address PO BOX 188

City	State	Zip Code
BANCROFT	WI	54921

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PARAMOUNT FARMS INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120262**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**JEFFREY BERENSON**

Mailing Address 888 PARK AVENUE, APT 12A

City	State	Zip Code
NEW YORK	NY	10075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BERENSON COMPANY

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120264**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5903.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JOSEPH BERES**

Mailing Address 108 VISTA LN

City	State	Zip Code
TAOS	NM	87571

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120266**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**CRYSTAL BERG**

Mailing Address 1962 ROBINS RUN

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128915**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

REATTRIBUTION FROM JAMES BERG

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**GRACE BERG**

Mailing Address 10167 N CARRISTO DRIVE

City	State	Zip Code
TUCSON	AZ	85737

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ARTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120268**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JAMES BERG**

Mailing Address 1962 ROBINS RUN

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CUSTOM PAK PRODUCTS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120270**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

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

**JAMES BERG**

Mailing Address 1962 ROBINS RUN

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CUSTOM PAK PRODUCTS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128913**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

REATTRIBUTION TO CRYSTAL BERG

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**JAMES BERG**

Mailing Address 1962 ROBINS RUN

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CUSTOM PAK PRODUCTS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.120274**

Date of Receipt

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

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address 1962 ROBINS RUN

City State Zip Code  
HARTFORD WI 53027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CUSTOM PAK PRODUCTS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120274.0**

Date of Receipt

**08** / **10** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

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

Mailing Address 1962 ROBINS RUN

City State Zip Code  
HARTFORD WI 53027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CUSTOM PAK PRODUCTS

Occupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.120274.1**

Date of Receipt

**08** / **10** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/08/2016

Amount of Each Receipt this Period

5400.00

☒ Memo Item

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

Mailing Address 603 N INDIAN RIVER DR #300

City State Zip Code  
FORT PIERCE FL 34950

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120272**

Date of Receipt

**06** / **19** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LAURENCE BERG**

Mailing Address 151 FAIRWAY COURT

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120275**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**LAURENCE BERG**

Mailing Address 151 FAIRWAY COURT

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120276**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**MARY BERGENDAL**

Mailing Address N6388 ENGLISH SETTLEMENT RD

City	State	Zip Code
ALBANY	WI	53502

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120278**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**RUSSELL BERGER**

Mailing Address PO BOX 1233

City	State	Zip Code
FRONT ROYAL	VA	22630

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120280**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**RUSSELL BERGER**

Mailing Address PO BOX 1233

City	State	Zip Code
FRONT ROYAL	VA	22630

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120281**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**RUSSELL BERGER**

Mailing Address PO BOX 1233

City	State	Zip Code
FRONT ROYAL	VA	22630

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.120282**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

350.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KEITH BERGH**

Mailing Address PO BOX 88507

City	State	Zip Code
SIOUX FALLS	SD	57109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120284**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

**DIANNE W BERGSTROM**

Mailing Address 315 CLARK ST

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BERGSTROM AUTOMOTIVE

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120286**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**JOHN F BERGSTROM**

Mailing Address 150 N GREEN BAY RD

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BERGSTROM AUTOMOTIVE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120288**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5800.00

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

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

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****DANIEL BERKOS**

Mailing Address 104 W. STATE ST.

City	State	Zip Code
MAUSTON	WI	53948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120290**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****ROBERT BERLIN**

Mailing Address 1253 BUR OAK CT

City	State	Zip Code
AVON	IN	46123-9476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.120291**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Amount of Each Receipt this Period

60.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****ROBERT BERLINER**

Mailing Address 2049 CENTURY PARK EAST, SUITE 2500

City	State	Zip Code
LOS ANGELES	CA	90067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WESTMOUNT ASSET MANAGEMENT LLCOccupation  
INVESTMENT ADVISOR

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120293**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

560.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**JAY M BERMAN**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120295**

Date of Receipt

**08 / 25 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**STEPHEN M BERMAN**

Mailing Address 2660 PEACHTREE RD NW

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BERMAN & ASSOCIATES

Occupation  
CHAIR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120297**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**CAROL BERNICK**

Mailing Address 179 E LAKE SHORE DR

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
POLISHED NICKEL CAPITAL

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120299**

Date of Receipt

**07 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**CAROL BERNICK**

Mailing Address **179 E LAKE SHORE DR**

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**POLISHED NICKEL CAPITAL**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120300**

Date of Receipt

**07 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

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

**LAWRENCE BERNSTEIN**

Mailing Address **100 E HURON STREET, APT**

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**TRADER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.120302**

Date of Receipt

**08 / 25 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

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

**LAWRENCE BERNSTEIN**

Mailing Address **100 E HURON STREET, APT**

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**TRADER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120302.0**

Date of Receipt

**08 / 25 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5400.00**

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MRS. LAWRENCE BERNSTEIN**

Mailing Address 100 E HURON ST APT 4002

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120302.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**WILLARD BERRIEN**

Mailing Address 5569 N LAKE DRIVE

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120304**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**FRANK R BERRY**

Mailing Address 217 CAYUGA TR

City	State	Zip Code
GAINESVILLE	TX	76240

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120306**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MONICA BERRY**

Mailing Address 709 S REMINGTON DR

City	State	Zip Code
ANGLETON	TX	77515

FEC ID number of contributing federal political committee.

C

Name of Employer  
HAGEMEYER NORTH AMERICA

Occupation  
INDUSTRIAL SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120307**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**NICHOLAS BERTRAM**

Mailing Address 3618 GOLFVIEW DRIVE

City	State	Zip Code
MECHANICSBURG	PA	17050

FEC ID number of contributing federal political committee.

C

Name of Employer  
AHOLD USA

Occupation  
RETAIL EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120309**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**KAREN BERTRAND**

Mailing Address W1890 WASHINGTON ROAD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120311**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DANIEL BERTSCH**

Mailing Address 700 LOMBARDY AVENUE APT 7102

City	State	Zip Code
NEWPORT NEWS	VA	23606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
US AIR FORCE

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.120313**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

275.00

☐ Memo Item

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

**JOHN BERTUCCI**

Mailing Address 50 HILL STREET

City	State	Zip Code
LEXINGTON	MA	02421

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.120315**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

220.00

☐ Memo Item

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

**LARRY BEST**

Mailing Address 2221 MCVOID

City	State	Zip Code
SPRINGTOWN	TX	76082

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120317**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

995.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PAUL BESTE**

Mailing Address 14095 GOLF PARKWAY

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
NA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.120319**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

700.00

☐ Memo Item

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

**JAMES A BEVINGTON**

Mailing Address 2147 CAMINO LAUREL

City	State	Zip Code
SAN CLEMENTE	CA	92673

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120321**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**LINDA E. BEYER**

Mailing Address 257 BLACKSTRAP RD

City	State	Zip Code
FALMOUTH	ME	04105

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120323**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LINDA E. BEYER**

Mailing Address **257 BLACKSTRAP RD**

City	State	Zip Code
FALMOUTH	ME	04105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120324**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**LINDA E. BEYER**

Mailing Address **257 BLACKSTRAP RD**

City	State	Zip Code
FALMOUTH	ME	04105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120325**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

Amount of Each Receipt this Period

**-500.00**

☐ Memo Item

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

**RAM BHATIA**

Mailing Address **15030 HUSHING BRAE CT**

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE INVESTMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.120326**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**250.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**HASAN BIBERAJ**

Mailing Address 234 W 56TH STREET

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120328**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**GENE BICKNELL**

Mailing Address PO BOX 643

City	State	Zip Code
PITTSBURG	KS	66762

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NATIONAL PIZZA CO.

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120330**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			17			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**MARGARET BIELIK**

Mailing Address 1144 BULEVAR DE PALMAS

City	State	Zip Code
MARATHON	FL	33050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120332**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

7400.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 147 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**MARGARET BIELIK**

Mailing Address 1144 BULEVAR DE PALMAS

City	State	Zip Code
MARATHON	FL	33050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128801**

Date of Receipt

**06** / **28** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**MARGARET BIELIK**

Mailing Address 1144 BULEVAR DE PALMAS

City	State	Zip Code
MARATHON	FL	33050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2735.00

**Transaction ID : SA17A.120333**

Date of Receipt

**07** / **28** / **2015**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**PAUL BIELIK**

Mailing Address 1144 BULEVAR DE PALMAS

City	State	Zip Code
MARATHON	FL	33050

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128803**

Date of Receipt

**06** / **28** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

35.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BROCK BIERMAN**

Mailing Address 35086 HARRY BYRD HIGHWAY

City	State	Zip Code
ROUND HILL	VA	20141

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ANCESTRY.COM

Occupation  
SENIOR DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120335**

Date of Receipt

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

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**BROCK BIERMAN**

Mailing Address 35086 HARRY BYRD HIGHWAY

City	State	Zip Code
ROUND HILL	VA	20141

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ANCESTRY.COM

Occupation  
SENIOR DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120336**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**BROCK BIERMAN**

Mailing Address 35086 HARRY BYRD HIGHWAY

City	State	Zip Code
ROUND HILL	VA	20141

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ANCESTRY.COM

Occupation  
SENIOR DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128763**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BROCK BIERMAN**

Mailing Address 35086 HARRY BYRD HIGHWAY

City	State	Zip Code
ROUND HILL	VA	20141

FEC ID number of contributing federal political committee.

C

Name of Employer  
ANCESTRY.COM

Occupation  
SENIOR DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128764**

Date of Receipt

MM / DD / YYYY  
08 / 28 / 2015

REDESIGNATION FROM GENERAL; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**BRIAN BIRSACH**

Mailing Address 8424 RIVER TERRACE DR

City	State	Zip Code
FRANKLIN	WI	53132

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120337**

Date of Receipt

MM / DD / YYYY  
08 / 04 / 2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

**ALLEN M BIEVER**

Mailing Address 147 E BEUTEL RD

City	State	Zip Code
PORT WASHINGT	WI	53074

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120339**

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1150.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ALLEN M BIEVER**

Mailing Address **147 E BEUTEL RD**

City	State	Zip Code
PORT WASHINGT	WI	53074

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.120340**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

**MIKE BIGGER**

Mailing Address **110 BUTLER STREET**

City	State	Zip Code
WYOMING	IL	61491

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120342**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

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

**JOHN BILBOW**

Mailing Address **300 HIDDEN CREEK DR**

City	State	Zip Code
FAYETTEVILLE	GA	30215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120344**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**BRUCE BILLINGS**

Mailing Address 578 EAST 9650 SOUTH

City	State	Zip Code
SALEM	UT	84653

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BDI

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120346**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**STEPHEN BILLS**

Mailing Address 1323 S 250 E

City	State	Zip Code
MAPLETON	UT	84664

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TONATEC EXPLORATION

Occupation  
GM

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120348**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**PATRICIA A BIRCK**

Mailing Address W6099 WILLOW BEND RD

City	State	Zip Code
WALWORTH	WI	53184

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120350**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

**TERRY L BIRCK**

Mailing Address **W6099 WILLOW BEND ROAD**

City	State	Zip Code
<b>WALWORTH</b>	<b>WI</b>	<b>53184</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.120352**

Date of Receipt

**08 / 17 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

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

**TERRY L BIRCK**

Mailing Address **W6099 WILLOW BEND ROAD**

City	State	Zip Code
<b>WALWORTH</b>	<b>WI</b>	<b>53184</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120353**

Date of Receipt

**08 / 17 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

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

**FRANK BIRCKHEAD**

Mailing Address **1928 ARLINGTON BOULEVAR**

City	State	Zip Code
<b>CHARLOTTESVIL</b>	<b>VA</b>	<b>22903</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BR FE**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120355**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5650.00**

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**F. G BITTER**

Mailing Address PO BOX 267

City	State	Zip Code
RYE BEACH	NH	03871

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120357**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**FRANK BITTINGER**

Mailing Address 15568 LACUNA DR

City	State	Zip Code
MONUMENT	CO	80132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120359**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**CYNTHIA BLACK**

Mailing Address 11524 INDIAN HAWTHORNE ST.

City	State	Zip Code
BAKERSFIELD	CA	93311

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120361**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.120362**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.120364**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120364.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 155 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.120364.1**

Date of Receipt

**07 / 22 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

300.00

☒ Memo Item

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3050.00

**Transaction ID : SA17A.15021**

Date of Receipt

**07 / 26 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.15021.0**

Date of Receipt

**07 / 26 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

50.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**KAREN BLACK**

Mailing Address 3341 AVENIDA HACIEND

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3050.00

**Transaction ID : SA17A.15021.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

**JOHN BLACKWELL**

Mailing Address 7510 STRATFORD PLACE

City	State	Zip Code
VESTAVA HILLS	AL	35242

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INKANA DEVELOPMENT**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120366**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**JOHN G BLACKWELL**

Mailing Address 7510 STRATFORD PLACE

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INKANA DEVELOPMENT**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2450.00

**Transaction ID : SA17A.120368**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

Amount of Each Receipt this Period

2450.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**PHILIP E BLAKE**

Mailing Address 259 MINORCA BEACH WA

7

City	State	Zip Code
NEW SMYRNA BE	FL	32169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PHILIP E BLAKE PA

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120370**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**WHITNEY BLAKESLEE**

Mailing Address 27855 SARABETH LANE

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ZINCATION, INC.

Occupation  
SMALL BUSINESS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120372**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**CURTIS D BLANC**

Mailing Address 7650 S REFORMATORY RD

City	State	Zip Code
EL RENO	OK	73036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MID-AMERICA CAR

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120373**

Date of Receipt

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

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ROBERT BLANCH**

Mailing Address 19618 76TH AVENUE NE

City	State	Zip Code
KENMORE	WA	98028

FEC ID number of contributing federal political committee.

C

Name of Employer  
BOEING

Occupation  
PAINTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120374**

Date of Receipt

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

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**CHARLES BLANCHARD**

Mailing Address 11429 BEACH RD

City	State	Zip Code
SISTER BAY	WI	54234

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120376**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**ELIZABETH BLANKINSHI**

Mailing Address 2302 STUTZ PLACE

City	State	Zip Code
MIDLAND	TX	79705

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120378**

Date of Receipt

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

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**DAVID BLANTON**

Mailing Address 14 CALLE CENIZO

City	State	Zip Code
BROWNSVILLE	TX	78520

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120380**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**STAN BLANTON**

Mailing Address 3025 CAMBRIDGE ROAD

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120382**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**EMILY BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120384**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**EMILY BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120385**

Date of Receipt

**09 / 04 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**EMILY BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120386**

Date of Receipt

**09 / 04 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

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

**LEONARD BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ACCESS INDUSTRIES

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.120388**

Date of Receipt

**09 / 04 / 2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LEONARD BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ACCESS INDUSTRIES**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120389**

Date of Receipt

**09 / 04 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

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

**LEONARD BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ACCESS INDUSTRIES**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120390**

Date of Receipt

**09 / 04 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

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

**LEONARD BLAVATNIK**

Mailing Address 730 FIFTH AVENUE, 20TH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ACCESS INDUSTRIES**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120391**

Date of Receipt

**09 / 04 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

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

Mailing Address 4651 OCEANKNOLL DR

City	State	Zip Code
HUNTINGTON BE	CA	92649

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ARENT FOX LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120393**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

Mailing Address 308 E PEPPERCORN DR

City	State	Zip Code
APPLETON	WI	54913

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MILLER ELECTRIC MFG. CO

Occupation  
DIRECTOR OF HUMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120395**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Mailing Address 20855 MACCAULAY DRIVE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120397**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**LEANNE BLOOM**

Mailing Address 6635 TURNBULL MILL R

City	State	Zip Code
ALPENA	MI	49707

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.120398**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

**SHARON BLOOM**

Mailing Address 20855 MACCAULAY DRIVE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120400**

Date of Receipt

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

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**SHARON BLOOM**

Mailing Address 20855 MACCAULAY DRIVE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.120401**

Date of Receipt

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

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

860.00

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

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**CHARLES BLOSSOM**

Mailing Address 4275 E HIGHWAY 163

City	State	Zip Code
COLUMBIA	MO	65201

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120403**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**BENJAMIN M BLUMBERG**

Mailing Address 6 HORIZON RD  
APT 2302

City	State	Zip Code
FORT LEE	NJ	07024

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

**Transaction ID : SA17A.120404**

Date of Receipt

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

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**ELLIOTT BLYMAN**

Mailing Address 3420 W COLONY DR

City	State	Zip Code
GREENFIELD	WI	53221

FEC ID number of contributing federal political committee.

C

Name of Employer  
VISA LIGHTING

Occupation  
GRAPHIC ARTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120406**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

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



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

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

**ELLIOTT BLYMAN**

Mailing Address 3420 W COLONY DR

City	State	Zip Code
GREENFIELD	WI	53221

FEC ID number of contributing federal political committee.

C

Name of Employer  
VISA LIGHTING

Occupation  
GRAPHIC ARTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120407**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELLIOTT BLYMAN**

Mailing Address 3420 W COLONY DR

City	State	Zip Code
GREENFIELD	WI	53221

FEC ID number of contributing federal political committee.

C

Name of Employer  
VISA LIGHTING

Occupation  
GRAPHIC ARTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.120408**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZABET BOCKSTAHLE**

Mailing Address 3310 OAK CREEK DR W

City	State	Zip Code
COLORADO SPRING	CO	80906

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.120410**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

725.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERIC BOELTER**

Mailing Address W291N3821 ROUND HILL CIR

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

C

Name of Employer  
BOELTER COMPANIES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120412**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALLEN BOETTCHER**

Mailing Address PO BOX 238

City	State	Zip Code
BOTTINEAU	ND	58318

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120414**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID BOETTGER**

Mailing Address 926 IRONWOOD RD

City	State	Zip Code
HARLAN	IA	51537

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120416**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JULIUS BOGGUS**

Mailing Address **1554 BUCK ISLAND DRIVE**

City <b>GUNTERSVILLE</b>	State <b>AL</b>	Zip Code <b>35976</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120418**

Date of Receipt

M M / D D / Y Y Y Y
08 / 23 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD BOGNER**

Mailing Address **4 HUNTERS LN**

City <b>ROSLYN</b>	State <b>NY</b>	Zip Code <b>11576</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.120419**

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD BOGNER**

Mailing Address **4 HUNTERS LN**

City <b>ROSLYN</b>	State <b>NY</b>	Zip Code <b>11576</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.120420**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**450.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL BOGOSIAN**

Mailing Address 105 MARLAND RD S

City	State	Zip Code
COLORADO SPRING	CO	80906

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PRIVATE INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120422**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DERALD BOGS**

Mailing Address 10621 TOWER DRIVE

City	State	Zip Code
ORLAND PARK	IL	60467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NOT EMPLOYED

Occupation  
NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120424**

Date of Receipt

**06 / 21 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DERALD BOGS**

Mailing Address 10621 TOWER DRIVE

City	State	Zip Code
ORLAND PARK	IL	60467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NOT EMPLOYED

Occupation  
NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.120425**

Date of Receipt

**07 / 19 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERALD BOGS**

Mailing Address 10621 TOWER DRIVE

City	State	Zip Code
ORLAND PARK	IL	60467

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120427**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY BOHREN**

Mailing Address W315S496 CHRISTOPHER WA

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120429**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER BOHRER**

Mailing Address 34100 SUNSET DR

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120431**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER BOHRER**

Mailing Address 34100 SUNSET DR

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120432**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELLEN BOLCH**

Mailing Address 703 DARCY AVENUE

City	State	Zip Code
SAVANNAH	GA	31419

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THA ISLAND HEALTH CARE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120434**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES BOLEN**

Mailing Address 14580 RESORT ROAD

City	State	Zip Code
CABLE	WI	54821

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CABLE AREA CHAMBER OF COMMERCE

Occupation  
CHAMBER DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120436**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3450.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN A BOLLERO**

Mailing Address W3590 MAPLE LN

City

LAKE GENEVA

State

WI

Zip Code

53147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120438**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARC BOND**

Mailing Address 14720 PARK HILLS CIRCLE

City

ANCHORAGE

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HILCORP ALASKA

Occupation

COUNSELOR

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120440**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY BONNETT**

Mailing Address 6252 GREATWATER DRIVE

City

WINDERMERE

State

FL

Zip Code

34786

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNSONVILLE

Occupation

LEARNING COORDINATOR

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120442**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANTHONY BONNETT**

Mailing Address 6252 GREATWATER DRIVE

City	State	Zip Code
WINDERMERE	FL	34786

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
JOHNSONVILLE

Occupation  
LEARNING COORDINATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120443**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

CHARGED BACK ON 6/30/2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANTHONY BONNETT**

Mailing Address 6252 GREATWATER DRIVE

City	State	Zip Code
WINDERMERE	FL	34786

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
JOHNSONVILLE

Occupation  
LEARNING COORDINATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129149**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

CHARGEBACK

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JILL BONNETT**

Mailing Address 6252 GREATWATER DRIVE

City	State	Zip Code
WINDERMERE	FL	34786

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120445**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID BORCHARDT**

Mailing Address 1236 W TWAIN AVE

City	State	Zip Code
FRESNO	CA	93711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120447**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHIRLEY M BOREN**

Mailing Address 2433 ST ROAD 105

City	State	Zip Code
ATKINS	AR	72823

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120449**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER BORER**

Mailing Address 295 GRANDE WAY, #504

City	State	Zip Code
NAPLES	FL	34110-6481

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-50.00

**Transaction ID : SA17A.16431**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID BORGEN**

Mailing Address 429 E DUPONT ROAD

City	State	Zip Code
FORT WAYNE	IN	46825

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120451**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ERIC BORGERDING**

Mailing Address 325 GLACIER RIDGE TR

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WISCONSIN HOSPITAL ASSOCIATION

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120453**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERIC BORGERDING**

Mailing Address 325 GLACIER RIDGE TR

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WISCONSIN HOSPITAL ASSOCIATION

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120454**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEAN BORLAND**

Mailing Address 403 APPLERIDGE CT

City	State	Zip Code
GIBSONIA	PA	15044

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120455**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVE BORMAN**

Mailing Address 11805 HARRIS RD SE

City	State	Zip Code
YELM	WA	98597

FEC ID number of contributing federal political committee.

C

Name of Employer  
KEYSTONE MASONRY, INC

Occupation  
MASONRY CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120457**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEFAN BOTHE**

Mailing Address 950 NELSON'S WALK

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

C

Name of Employer  
FLEXI SOFTWARE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120459**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KELLY A BOURDO**

Mailing Address 359 LOWER LAKE DR

City	State	Zip Code
MERRILLAN	WI	54754

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120461**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANNE BOURNE**

Mailing Address 2960 SALES LANDING RD

City	State	Zip Code
CAMDEN	TN	38320

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.00

**Transaction ID : SA17A.120463**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

213.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEROEN BOURS**

Mailing Address 12 HEMSLEY LANE

City	State	Zip Code
GREAT NECK	NY	11023

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DARLING AGENCY NYC

Occupation  
MAD MEN (ADVERTISING)

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

**Transaction ID : SA17A.120465**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2413.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**OTIS BOWDEN**

Mailing Address 428 BEACHSIDE PL

City	State	Zip Code
AMELIA ISLAND	FL	32034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120467**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER BOWEN**

Mailing Address 12822 FRAMINGHAM COURT

City	State	Zip Code
HERNDON	VA	20171

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ARENT FOX LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

**Transaction ID : SA17A.120468**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID BOWERS**

Mailing Address 2 FOUNTAINVIEW TERRACE  
4

City	State	Zip Code
GREENVILLE	SC	29607

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COMPX INTERNATIONAL INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.120470**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

600.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1320.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120472**

Date of Receipt

**08** / **06** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.120473**

Date of Receipt

**08** / **10** / **2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6400.00

**Transaction ID : SA17A.120474**

Date of Receipt

**08** / **10** / **2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

6400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9100.00

**Transaction ID : SA17A.120475**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6400.00

**Transaction ID : SA17A.120476**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.120477**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

-2700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**B. BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DR

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120478**

Date of Receipt

**08 / 10 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA BOWIE-WHITMAN**

Mailing Address 4326 UPLAND DRIVE

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

**Transaction ID : SA17A.120480**

Date of Receipt

**07 / 12 / 2015**

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN BOWLER**

Mailing Address 3315 W COBBLESTONE C

City	State	Zip Code
HARLINGEN	TX	78550

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AUTOSYSTEMS AMERICA INC.

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120481**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEVERE BOYD**

Mailing Address 433 ARLINGTON ST.

City	State	Zip Code
GRAND HAVEN	MI	49417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL BUSINESS BROKERS

Occupation  
0

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120483**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRADLEY BOYER**

Mailing Address 66 GLENVIBE ROAD

City	State	Zip Code
GREENWICH	CT	06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWO SIGMA INVESTMENTS LLC

Occupation  
INVESTMENT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.120485**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN BOYETTE SR.**

Mailing Address 4550 MERCK ROAD W

City	State	Zip Code
WILSON	NC	27893

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.120487**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1970.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RALPH BOZEMAN**

Mailing Address PO BOX 20590

City	State	Zip Code
HOT SPRINGS	AR	71903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120489**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RALPH BOZEMAN**

Mailing Address PO BOX 20590

City	State	Zip Code
HOT SPRINGS	AR	71903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120490**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DON BRAATEN**

Mailing Address 419 SOUTH GARFIELD AVE.

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120492**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

850.00

**Total This Period** (last page this line number only) .....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****JANIS BRACKEY**

Mailing Address 4647 THOMAS RUSK

City	State	Zip Code
SAN ANTONIO	TX	78253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.120494**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

203.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****D SCOTT BRADLEY**

Mailing Address 2275 E TIMBERTRAILS ROAD

City	State	Zip Code
LISLE	IL	60532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INVESTORTOOLSOccupation  
PRESIDENT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120496**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			29			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****JAMES R BRADLEY**

Mailing Address 4110 MANDAN CRES

City	State	Zip Code
MADISON	WI	53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120498**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			29			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES H BRADLEY JR**

Mailing Address 413 BOYD MILL AVE

City	State	Zip Code
FRANKLIN	TN	37064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NFL

Occupation  
SECURITY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120500**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES H BRADLEY JR**

Mailing Address 413 BOYD MILL AVE

City	State	Zip Code
FRANKLIN	TN	37064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NFL

Occupation  
SECURITY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.120501**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NELSON BRAFF**

Mailing Address 50 ROSS AVENUE

City	State	Zip Code
DEMAREST	NJ	07627

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120503**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHIRLEY BRAGEL**

Mailing Address 85 CRABTREE RD

City	State	Zip Code
QUINCY	MA	02171

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120504**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STUART BRAINERD**

Mailing Address 1802 W BERTEAU AVE  
STE 205

City	State	Zip Code
CHICAGO	IL	60613

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SYNAPSE NETWORKS**

Occupation  
**IT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120506**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARLIN M BRALLIER**

Mailing Address 2110 FIREMANS LODGE

City	State	Zip Code
ALEXANDRIA	MN	56308

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120508**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT BRAMLETT**

Mailing Address PO BOX 369

City State Zip Code  
ARDMORE OK 73402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE BRAMLETT AGENCY, INC.

Occupation  
INDEPENDENT INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120510**

Date of Receipt

M M / D D / Y Y Y Y  
07 15 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANEL BRANDTJEN**

Mailing Address N52W16632 OAK RIDGE

City State Zip Code  
MENOMONEE FAL WI 53051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GROUP ONE MARKETING INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.120512**

Date of Receipt

M M / D D / Y Y Y Y  
07 14 2015

Amount of Each Receipt this Period

450.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD BRANNING**

Mailing Address 2400 TAXIWAY ECHO

City State Zip Code  
PORT ORANGE FL 32128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120514**

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID BRASWELL**

Mailing Address 2119 STRADIVARIUS LN

City	State	Zip Code
CARROLLTON	TX	75007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PALO ALTO NETWORKS**

Occupation  
**NETWORK SECURITY ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120515**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DARRELL S BRAUN**

Mailing Address 5804 LAKE EDGE ROAD

City	State	Zip Code
MCFARLAND	WI	53558

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120517**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARVEY BRAUN**

Mailing Address 6 FAWN DR

City	State	Zip Code
LIVINGSTON	NJ	07039

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120518**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EMERY BRAWLEY**

Mailing Address 149 CANTER WAY

City	State	Zip Code
ALABASTER	AL	35007

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120519**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**REBECCA BREMBERG**

Mailing Address 41 BLAINE ST.

City	State	Zip Code
MILLBURN	NJ	07041

FEC ID number of contributing federal political committee.

C

Name of Employer  
PRECISION SYSTEMS DESIGN

Occupation  
SR TECHNICAL RECRUITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120521**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN BRENNAN**

Mailing Address 2503 CREEKBEND CIRCLE

City	State	Zip Code
SHERMAN	TX	75092

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120523**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN BRENNAN**

Mailing Address 12314 N WOODFIELD COURT

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120524**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TIMOTHY BRENNAN**

Mailing Address 455 COUNTRY CLUB LANE

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RIVER STEEL, INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120526**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CONLEY BRIAN**

Mailing Address 7 EAST 14TH STREET - APT. 730

City	State	Zip Code
NEW YORK	NY	10003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120528**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

550.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT BRIDGE**

Mailing Address 217 FOY ROAD

City	State	Zip Code
MADISON	AL	35758

FEC ID number of contributing federal political committee.

C

Name of Employer  
NASA

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

476.00

**Transaction ID : SA17A.120530**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

476.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLAYTON BRIDGES**

Mailing Address 1669 ADSWOOD RD

City	State	Zip Code
CLARKSVILLE	TN	37042

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120531**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY BRIDGES**

Mailing Address 584 CUMBERLAND RIDGE

City	State	Zip Code
BOWLING GREEN	KY	42103

FEC ID number of contributing federal political committee.

C

Name of Employer  
BGMU

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120532**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

726.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY BRIDGES**

Mailing Address **584 CUMBERLAND RIDGE**

City <b>BOWLING GREEN</b>	State <b>KY</b>	Zip Code <b>42103</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BGMU**

Occupation  
**CFO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.120533**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH BRIGGS**

Mailing Address **1801 9TH ST**

City <b>LOS OSOS</b>	State <b>CA</b>	Zip Code <b>93402</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**238.00**

**Transaction ID : SA17A.120534**

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period

**103.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROSEMARY H BRIGGS**

Mailing Address **4711 WATAUGA RD**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75209</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120536**

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1203.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOEL BRIND**

Mailing Address **57 POINT ST**

City <b>NEW HAMBURG</b>	State <b>NY</b>	Zip Code <b>12590</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BARUCH COLLEGE, CUNY**

Occupation  
**PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120538**

Date of Receipt

M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT BRINKMAN**

Mailing Address **1761 SE 7TH ST**

City <b>FORT LAUDERDALE</b>	State <b>FL</b>	Zip Code <b>33316</b>
--------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120540**

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BEATRICE T BRITTON**

Mailing Address **466 HIGHLAND ST APT B23**  
**P**

City <b>SOUTH HAMILTO</b>	State <b>MA</b>	Zip Code <b>01982</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120542**

Date of Receipt

M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2500.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BEATRICE T BRITTON**

Mailing Address **466 HIGHLAND ST APT B23**  
**P**

City	State	Zip Code
<b>SOUTH HAMILTON</b>	<b>MA</b>	<b>01982</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1200.00**

**Transaction ID : SA17A.120543**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES BROADDUS**

Mailing Address **605 RAINBOW COVE**

City	State	Zip Code
<b>AUSTIN</b>	<b>TX</b>	<b>78746</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BROADDUS & ASSOCIATES**

Occupation  
**ASSOCIATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120545**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONNIE V BROCK**

Mailing Address **2021 S LEWIS AVE**

City	State	Zip Code
<b>TULSA</b>	<b>OK</b>	<b>74104</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120547**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

**REATTRIBUTED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 194 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN BROCK**

Mailing Address 2021 S LEWIS AVE

T

City

TULSA

State

OK

Zip Code

74104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROCKFORD EXPLORATION

Occupation

PETROLEUM ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120549**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN BROCK**

Mailing Address 2021 S LEWIS AVE

T

City

TULSA

State

OK

Zip Code

74104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROCKFORD EXPLORATION

Occupation

PETROLEUM ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120550**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM BROCKETT**

Mailing Address 1215 JAMES MADISON H

City

HAYMARKET

State

VA

Zip Code

20169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VIRGINIA BEEF CORPORATION

Occupation

AGRICUTURE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120552**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARION BROCKETTE**

Mailing Address 3324 PHAETON COURT

City	State	Zip Code
PLANO	TX	75023

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120554**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUG BROCKWAY**

Mailing Address 4490 BIRCHWOOD LANE

City	State	Zip Code
ALLISON PARK	PA	15101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CINCINNATI FINANCIAL

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120556**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRENT R BRODESKI**

Mailing Address 5132 PARLIAMENT PL

City	State	Zip Code
ROCKFORD	IL	61107

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SAVANT CAPITAL LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120558**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RENTON BRODIE**

Mailing Address 17138 RIVER BLUFF DRIVE

City	State	Zip Code
UNION PIER	MI	49129

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120560**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT E BROOKER**

Mailing Address 175 SCHOOL ST

City	State	Zip Code
MANCHESTER	MA	01944

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.120562**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD BROOKS**

Mailing Address 1262 WINWOOD DRIVE

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120564**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 197 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN BROOKS**

Mailing Address 3703 N ALPINE RD

City	State	Zip Code
ROCKFORD	IL	61114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROAD RANGER LLC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120566**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BETTY BROWN**

Mailing Address 45 HOGAN FARM ROAD

City	State	Zip Code
SEAGROVE	NC	27341

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
VETERINARIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120568**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID BROWN**

Mailing Address 7320 N COUNTRY CLUB DRIVE

City	State	Zip Code
OKLAHOMA CITY	OK	73116

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120570**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 198 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE BROWN**

Mailing Address 26291 MIRA WAY

City	State	Zip Code
BONITA SPRINGS	FL	34134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120572**

Date of Receipt

**07** / **21** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE BROWN**

Mailing Address 26291 MIRA WAY

City	State	Zip Code
BONITA SPRINGS	FL	34134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.120573**

Date of Receipt

**08** / **05** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE BROWN**

Mailing Address 26291 MIRA WAY

City	State	Zip Code
BONITA SPRINGS	FL	34134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120574**

Date of Receipt

**08** / **05** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 199 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES BROWN**

Mailing Address 700 FRONT STREET

City

SAN DIEGO

State

CA

Zip Code

92101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120576**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 06 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES BROWN**

Mailing Address 1051 CLARK ST

City

ABINGDON

State

VA

Zip Code

24210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMING/ENERGY PRODUCTION

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120578**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 13 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANE BROWN**

Mailing Address 26643 CLARK RD

City

WALLER

State

TX

Zip Code

77484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INCENTIVE FLOOR MAINTENANCE, INC.

Occupation

OFFICE MANAGER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120580**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 200 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY ANN BROWN**

Mailing Address 304 WEYMOUTH PLACE

City	State	Zip Code
LAGUNA BEACH	CA	92651

FEC ID number of contributing federal political committee.

C

Name of Employer  
PACIFIC LIFE INSURANCE

Occupation  
E.V.P.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120582**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL G BROWN**

Mailing Address 212 PRAIRIE LN

City	State	Zip Code
FORSYTH	IL	62535

FEC ID number of contributing federal political committee.

C

Name of Employer  
BNA

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120584**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL BROWN**

Mailing Address 1111 NECHES DRIVE

City	State	Zip Code
ALLEN	TX	75013

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120586**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA BROWN**

Mailing Address 626 ELLIOTT RD

City	State	Zip Code
MCDONOUGH	GA	30252

FEC ID number of contributing federal political committee.

C

Name of Employer  
SERVPRO OF DECATUR

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.120587**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2015

Amount of Each Receipt this Period

125.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICIA BROWN**

Mailing Address 626 ELLIOTT RD

City	State	Zip Code
MCDONOUGH	GA	30252

FEC ID number of contributing federal political committee.

C

Name of Employer  
SERVPRO OF DECATUR

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : SA17A.120588**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVE BROWN**

Mailing Address 3729 RAILWAY AVE SE

City	State	Zip Code
HUNTSVILLE	AL	35801

FEC ID number of contributing federal political committee.

C

Name of Employer  
AVAILABLE PLASTICS, INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120590**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

725.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS BROWN**

Mailing Address **3 DUNWOODIE PLACE**

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120592**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WAYNE BROWN**

Mailing Address **1574 STATE RT 23**

City	State	Zip Code
BUTLER	NJ	07405

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**325.00**

**Transaction ID : SA17A.120593**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WAYNE BROWN**

Mailing Address **1574 STATE RT 23**

City	State	Zip Code
BUTLER	NJ	07405

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**330.00**

**Transaction ID : SA17A.120594**

Date of Receipt

**09 / 16 / 2015**

Amount of Each Receipt this Period

**5.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**655.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM BROWNELL**

Mailing Address 3622 HANOVER DRIVE

City	State	Zip Code
GAINESVILLE	GA	30506

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120596**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABETH BROWNING**

Mailing Address 749 17TH AVENUE E

City	State	Zip Code
SEATTLE	WA	98112

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120598**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL BRUBECK**

Mailing Address 1200 ROYAL TERN DR

City	State	Zip Code
PUNTA GORDA	FL	33950

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120600**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT BRUCE**

Mailing Address 100 BOERNE STAGE AIRFIELD

City	State	Zip Code
BOERNE	TX	78006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BOERNE STAGE AIRFIELD

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120602**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DON BRUCKNER**

Mailing Address 911 WAGON TRAIN DR S

City	State	Zip Code
ALBUQUERQUE	NM	87123

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GUEBERT BRUCKNER P.C.

Occupation  
GUEBERT BRUCKNER P.C.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120604**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS BRUDER**

Mailing Address 600 REED RD  
S

City	State	Zip Code
BROOMALL	PA	19008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120606**

Date of Receipt

**06 / 23 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 205 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ULLA E BRUNK**

Mailing Address **W3885 CREEK LN**

City State Zip Code  
**LAKE GENEVA WI 53147**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BRUNK INDUSTRIES, INC.**

Occupation  
**CFO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120608**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JANELL S BRUNNER**

Mailing Address **11939 MANCHESTER RD**  
**#**

City State Zip Code  
**SAINT LOUIS MO 63131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120610**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN BRUNNER**

Mailing Address **11939 MANCHESTER ROAD #**

City State Zip Code  
**ST. LOUIS MO 63131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2300.00**

**Transaction ID : SA17A.120612**

Date of Receipt

**07 / 24 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2300.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5400.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA BRUNS**

Mailing Address **S1W31433 HICKORY HOL**

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BRUNS APPRAISAL LLC**

Occupation  
**REAL ESTATE AGENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**290.00**

**Transaction ID : SA17A.120613**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROGER BRUNS**

Mailing Address **10921 SOUTH COLLEGE LN**

City	State	Zip Code
OLATHE	KS	66061

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120615**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT BRUSSEAU**

Mailing Address **2892 LANE JACK ROAD**

City	State	Zip Code
CARLSBAD	CA	92008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NEWPORT NATIONAL**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.120617**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CURTIS BRYAN**

Mailing Address 920 HERMOSA AVE.

City	State	Zip Code
RIDGECREST	CA	93555

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120619**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD D BRYAN**

Mailing Address 3207 S YORKTOWN AVE

City	State	Zip Code
TULSA	OK	74105

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120621**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY W BRYANT**

Mailing Address 108 N BARSTOW ST

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

C

Name of Employer  
CENTURY FENCE COMPANY

Occupation  
CHAIRMAN & CORP. SECRETARY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

**Transaction ID : SA17A.120623**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

2400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD BRYANT**

Mailing Address PO BOX 215

City	State	Zip Code
GLENNS FERRY	ID	83623

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120625**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN BRYANT**

Mailing Address PO BOX 7

City	State	Zip Code
SENECA	SD	57473

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.120627**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN BRYANT**

Mailing Address PO BOX 7

City	State	Zip Code
SENECA	SD	57473

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2553.00

**Transaction ID : SA17A.120628**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

53.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2803.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABETH BRYDEN**

Mailing Address 1 W 67TH STREET APT 611

City	State	Zip Code
NEW YORK	NY	10023

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

**Transaction ID : SA17A.120630**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

305.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEROME BUBOLTZ**

Mailing Address 7200 SUSAN DR

City	State	Zip Code
WEST BEND	WI	53090

FEC ID number of contributing federal political committee.

C

Name of Employer  
AURORA MEDICAL CENTER  
WASHINGTON COUNTY

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120632**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET BUCK**

Mailing Address 27468 SHACKETT AVE

City	State	Zip Code
WARREN	MI	48093

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.120634**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

758.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT D BUCKINGHAM**

Mailing Address 5311 CARRIAGE HILLS

City	State	Zip Code
RAPID CITY	SD	57702

FEC ID number of contributing federal political committee.

C

Name of Employer  
PLORAH, INC.

Occupation  
EDUCATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

**Transaction ID : SA17A.120636**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL BUCKLEY**

Mailing Address 4284 S HUDSON PKWY

City	State	Zip Code
CHERRY HILLS	CO	80113

FEC ID number of contributing federal political committee.

C

Name of Employer  
BUCKLEY POWDER COMPANY

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120638**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFF BUCKMAN**

Mailing Address 105 AIRPORT ROAD

City	State	Zip Code
POTTSTOWN	PA	19464

FEC ID number of contributing federal political committee.

C

Name of Employer  
BUCKMAN'S INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120640**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****ALFRED J BUESCHER**

Mailing Address 17001 SHAKER BOULEVARD

City	State	Zip Code
SHAKER HEIGHT	OH	44120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120641**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****MARY BUESTRIN**

Mailing Address 1000 W. CALUMET RD.

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120642**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****LISA BUGNI**

Mailing Address 1045 ROSEWOOD DRIVE

City	State	Zip Code
ATLANTA	GA	30306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALSTON & BIRDOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120644**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GAYLE BUHLER**

Mailing Address 1515 HYDE PARK BLVD  
APT 36

City State Zip Code  
HOUSTON TX 77006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120645**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL E BUHLMAN**

Mailing Address N419 296TH ST

City State Zip Code  
EAU GALLE WI 54737

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

**Transaction ID : SA17A.120646**

Date of Receipt

M M / D D / Y Y Y Y  
08 13 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL E BUHLMAN**

Mailing Address N419 296TH ST

City State Zip Code  
EAU GALLE WI 54737

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : SA17A.120647**

Date of Receipt

M M / D D / Y Y Y Y  
08 13 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-100.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2850.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN BUHLMAN**

Mailing Address **N419 296TH STREET**

City	State	Zip Code
<b>EAU GALLE</b>	<b>WI</b>	<b>54737</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**100.00**

**Transaction ID : SA17A.19516**

Date of Receipt

**08 / 13 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**100.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL BUKOWSKI**

Mailing Address **702 S. WRIGHT ST.**

City	State	Zip Code
<b>NAPERVILLE</b>	<b>IL</b>	<b>60540</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120649**

Date of Receipt

**08 / 30 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRANT N BUKOWSKY**

Mailing Address **217 N 9TH ST**

City	State	Zip Code
<b>COLUMBIA</b>	<b>MO</b>	<b>65201</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BUKOWSKY LAW FIRM**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120651**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH BULL**

Mailing Address PO BOX 41

City	State	Zip Code
GAYLORD	MN	55334

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.120653**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

375.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH BULL**

Mailing Address 22104 SHANNONDELL DRIVE

City	State	Zip Code
NORRISTOWN	PA	19403

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120655**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RODNEY A BULLIS**

Mailing Address 238 BITTERSWEET DR

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

C

Name of Employer  
NEFF ENGINEERIN

Occupation  
ACCOUNT MG

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120657**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

875.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONNA BUNN**

Mailing Address PO BOX 513

City	State	Zip Code
LOTHIAN	MD	20711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120659**

Date of Receipt

**09 / 03 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JONATHAN BURKAN**

Mailing Address 49 N 8TH STREET, APT 40

City	State	Zip Code
BROOKLYN	NY	11249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UBS

Occupation  
FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120661**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN BURKE**

Mailing Address 7710 NORTH MERRIE LANE

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BURKE PROPERTIES

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120663**

Date of Receipt

**09 / 15 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHRYN M BURKE**

Mailing Address 7710 N MERRIE LN

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120665**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHRYN M BURKE**

Mailing Address 7710 N MERRIE LN

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120666**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT J BURKE**

Mailing Address PO BOX 1539

City	State	Zip Code
HOBOKEN	NJ	07030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UNION DRY DOCK & REPAIR

Occupation  
CHIEF EXECUTIVE OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120667**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS BURKE**

Mailing Address 3361 MICHIGAN BLVD.

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MODINE MFG. CO.

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120669**

Date of Receipt

**09 / 02 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES BURKETT**

Mailing Address 15502 AMBER HOLLOW LN.

City	State	Zip Code
CYPRESS	TX	77429

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

370.00

**Transaction ID : SA17A.120670**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES BURKETT**

Mailing Address 15502 AMBER HOLLOW LN.

City	State	Zip Code
CYPRESS	TX	77429

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

620.00

**Transaction ID : SA17A.120671**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES BURKETT**

Mailing Address 15502 AMBER HOLLOW LN.

City	State	Zip Code
CYPRESS	TX	77429

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1120.00

**Transaction ID : SA17A.120672**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 06 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE BURNETT**

Mailing Address 806 LAWTON PLACE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

C

Name of Employer  
Conway, Olejniczak & Jerry

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120674**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 03 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD BURNETT**

Mailing Address 13519 TAYLORCREST

City	State	Zip Code
HOUSTON	TX	77079

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120676**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 219 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD E BURR**

Mailing Address 1031 WILLOW TRL

City	State	Zip Code
GOODLETTSVILL	TN	37072

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STONEBRIDGE GALLERY

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120678**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANK BURROWS**

Mailing Address 1775 WEST OAK COMMONS COURT NE

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MIMEDX

Occupation  
VP CLINICAL & SCIENTIFIC LIAISON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120680**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GENE BURRUS**

Mailing Address 111 BIRNAM WOOD COURT

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120682**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 220 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STACEY BURRY**

Mailing Address 4212 CASSANDRA LN

City	State	Zip Code
PLANO	TX	75093

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120684**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM BURSTON**

Mailing Address 7317 WALNUT KNOLL DRIVE

City	State	Zip Code
SPRINGFIELD	VA	22153

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120686**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KELLY BURT**

Mailing Address 10920 VIA FRONTERA #510

City	State	Zip Code
SAN DIEGO	CA	92127

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120688**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 221 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID BURTON**

Mailing Address **1961 EASTWOOD AVE**

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PMT**

Occupation  
**TOOL MFR.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120690**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AUGUST A BUSCH**

Mailing Address **PO BOX 935**

City	State	Zip Code
SAINT PETERS	MO	63376

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.120692**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AUGUST A BUSCH**

Mailing Address **PO BOX 935**

City	State	Zip Code
SAINT PETERS	MO	63376

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120693**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 222 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AUGUST A BUSCH**

Mailing Address PO BOX 935

City

SAINT PETERS

State

MO

Zip Code

63376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120694**

Date of Receipt

MM / DD / YYYY  
07 / 29 / 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VIRGINIA L BUSCH**

Mailing Address PO BOX 935

City

SAINT PETERS

State

MO

Zip Code

63376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BUSCH & LAMPIN

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.120696**

Date of Receipt

MM / DD / YYYY  
07 / 29 / 2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VIRGINIA L BUSCH**

Mailing Address PO BOX 935

City

SAINT PETERS

State

MO

Zip Code

63376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BUSCH & LAMPIN

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120697**

Date of Receipt

MM / DD / YYYY  
07 / 29 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 223 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**VIRGINIA L BUSCH**

Mailing Address PO BOX 935

City	State	Zip Code
SAINT PETERS	MO	63376

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BUSCH & LAMPIN**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120698**

Date of Receipt

**07** / **29** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VIRGINIA L BUSCH**

Mailing Address PO BOX 935

City	State	Zip Code
SAINT PETERS	MO	63376

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BUSCH & LAMPIN**

Occupation  
**ATTORNEY**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120699**

Date of Receipt

**07** / **29** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA BUSIKER**

Mailing Address 5944 WOODS EDGE RD

City	State	Zip Code
FITCHBURG	WI	53711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.120701**

Date of Receipt

**09** / **04** / **2015**

Amount of Each Receipt this Period

375.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

375.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BEATRICE BUSTEED**

Mailing Address 21351 MAZATLAN

City	State	Zip Code
MISSION VIEJO	CA	92692

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120702**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACOB B BUTCHER**

Mailing Address 2463 HARDIN FARMS LN

City	State	Zip Code
KNOXVILLE	TN	37932

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BBRE COMMERCIAL INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120704**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**A. BUTLER**

Mailing Address 207 ROSELAND DRIVE

City	State	Zip Code
RAINBOW CITY	AL	35906

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BUTLER PROPERTIES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120706**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN A BUTLER**

Mailing Address 1005 AUGUSTA AVENUE

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PLASTIC SURGERY GROUP

Occupation  
MD

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120708**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KAREN M BUTZ**

Mailing Address 1120 W DECORAH RD

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120710**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KAREN M BUTZ**

Mailing Address 1120 W DECORAH RD

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120711**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

750.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN M BUTZ**

Mailing Address 1120 W DECORAH RD

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.120712**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VON BYALL**

Mailing Address 8512 ENSLEY PL

City	State	Zip Code
LEAWOOD	KS	66206

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120714**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID BYCZEK**

Mailing Address 238 N LAKE ROAD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NATIONAL MANAGEMENT LLC

Occupation  
REAL ESTATE DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.120716**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			15			2015			

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A.** Full Name (Last, First, Middle Initial)

RONALD BYER

Mailing Address 87 BAY POINT HARBOUR

City	State	Zip Code
POINT PLEASAN	NJ	08742

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.120718

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)

DAVID F BYERS

Mailing Address 4233 OLD BROOK TRAIL

City	State	Zip Code
BIRMINGHAM	AL	35243

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.120720

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)

WILLIAM BYRD

Mailing Address 35 S ROYAL FERN DRIVE

City	State	Zip Code
THE WOODLANDS	TX	77380

FEC ID number of contributing federal political committee.

C

Name of Employer  
RCP, INCOccupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.120722

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3700.00

Total This Period (last page this line number only).....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUANITA F BYRNS**

Mailing Address 3900 VALLEY OAKS DRIVE

City	State	Zip Code
CLINTON	IA	52732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120724**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUANITA F BYRNS**

Mailing Address 3900 VALLEY OAKS DRIVE

City	State	Zip Code
CLINTON	IA	52732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.120725**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUANITA F BYRNS**

Mailing Address 3900 VALLEY OAKS DRIVE

City	State	Zip Code
CLINTON	IA	52732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120725.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-1000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUANITA F BYRNS**

Mailing Address 3900 VALLEY OAKS DRIVE

City	State	Zip Code
CLINTON	IA	52732

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.120725.1**

Date of Receipt

**09 / 02 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIS BYWATER**

Mailing Address 621 S SUMMIT ST

City	State	Zip Code
IOWA CITY	IA	52240

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ECONOMNY ADVERTISING CO.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120727**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARVEY L ARMSTRONG CA**

Mailing Address 94 LA LOMA DRIVE

City	State	Zip Code
MENLO PARK	CA	94025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CTC-MYCFO, LLC

Occupation  
FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120729**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATTHEW CABELL**

Mailing Address 3519 ROBINHOOD STREET

City	State	Zip Code
HOUSTON	TX	77005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SEWECA RESOURCES**

Occupation  
**PRES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120731**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EMILIO CABRERA**

Mailing Address 812 ORTEGA AVENUE

City	State	Zip Code
CORAL GABLES	FL	33134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**E&M CONTRACTOR**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120733**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTHA CADE**

Mailing Address 11506 NW 129TH TERRACE

City	State	Zip Code
ALACHUA	FL	32615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120735**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LUCILLE CADWELL**

Mailing Address 3000 W. BELMONT DR.

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROGER CAGANN**

Mailing Address 469 SUMNER STREET

City	State	Zip Code
GENOA CITY	WI	53128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AXIOM PROPERTIES, INC**

Occupation  
**INVESTMENT REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120738**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES CAGE**

Mailing Address 3259 DAVENPORT PARK LANE

City	State	Zip Code
DULUTH	GA	30096

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120740**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAULA CAHOON**

Mailing Address 2162 DIAMOND ST

City	State	Zip Code
SAN DIEGO	CA	92109

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120742**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH CAILLOUX**

Mailing Address 303 SPRING MILL DR

City	State	Zip Code
KERRVILLE	TX	78028

FEC ID number of contributing federal political committee.

C

Name of Employer  
CAILLOUX FOUNDATION

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120744**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DELVER R CAIN**

Mailing Address 4230 PARVA AVENUE

City	State	Zip Code
LOS ANGELES	CA	90027

FEC ID number of contributing federal political committee.

C

Name of Employer  
DELVER R CAIN MD INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120746**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. M CAIN**

Mailing Address 6211 PHEASANT CREEK TRA

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120748**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHESTER A CAINE**

Mailing Address P.O. BOX 376

City	State	Zip Code
LOWELL	WI	53557

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120750**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN CAIRNCROSS**

Mailing Address PO BOX 91141

City	State	Zip Code
SAN DIEGO	CA	92169

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RE/MAX COASTED PROPERTIES

Occupation  
BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.120752**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK CALANDRA**

Mailing Address PO BOX 111253

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JENNMAR**

Occupation  
**PRES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120754**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DANNY D CALDWELL**

Mailing Address 400 CARDINAL CIR APT 6

City	State	Zip Code
BURLINGTON	WI	53105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120755**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARGARET CALDWELL**

Mailing Address 2975 TERRACE DRIVE

City	State	Zip Code
LAS CRUCES	NM	88011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120757**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

950.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM CALDWELL**

Mailing Address **PO BOX 3579**

City	State	Zip Code
<b>PONTE VEDRA B</b>	<b>FL</b>	<b>32004</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**253.00**

**Transaction ID : SA17A.120759**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**253.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUSAN E CALHOUN**

Mailing Address **472 GABRIEL DR**

City	State	Zip Code
<b>KIRKWOOD</b>	<b>MO</b>	<b>63122</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120761**

Date of Receipt

**06 / 28 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUSAN E CALHOUN**

Mailing Address **472 GABRIEL DR**

City	State	Zip Code
<b>KIRKWOOD</b>	<b>MO</b>	<b>63122</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.120762**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**603.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JASON CALL**

Mailing Address 1012 LONG BEECHES AVENUE

City	State	Zip Code
CHESAPEAKE	VA	23320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ECPI UNIVERSITY

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120764**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JUDITH CALVY**

Mailing Address W278N2471 PROSPECT AVEN

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120766**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ALAN CAMERON**

Mailing Address 2727 MERRIHILLS DR SW

City	State	Zip Code
ROCHESTER	MN	55902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120767**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

600.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA L CAMERON**

Mailing Address 4268 PACIFICO LANE

City	State	Zip Code
LAS VEGAS	NV	89135

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120769**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID CAMPBELL**

Mailing Address 9196 MCELWEE RIVER CIRC

City	State	Zip Code
FOUNTAIN VALL	CA	92708

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REALTOR ASSISTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120770**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID CAMPBELL**

Mailing Address 9196 MCELWEE RIVER CIRC

City	State	Zip Code
FOUNTAIN VALL	CA	92708

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REALTOR ASSISTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120771**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		19		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN W CAMPBELL**

Mailing Address 526 REGENTVIEW DR

City	State	Zip Code
HOUSTON	TX	77079

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120773**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STUART CAMPBELL**

Mailing Address 10350 S BRADEN AVENUE

City	State	Zip Code
TULSA	OK	74137

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120775**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TODD CAMPBELL**

Mailing Address 3437 TIMBER LAKE COURT

City	State	Zip Code
KENNESAW	GA	30144

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120777**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TRACY CAMPBELL**

Mailing Address 356 W WISCONSIN ST

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120779**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TRACY CAMPBELL**

Mailing Address 356 W WISCONSIN ST

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.120780**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK CANCIAN**

Mailing Address 5540 14TH ROAD NORTH

City	State	Zip Code
ARLINGTON	VA	22205

FEC ID number of contributing federal political committee.

C

Name of Employer  
CSIS

Occupation  
WRITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120782**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFFREY CANFIELD**

Mailing Address 19307 ROAD Q

City	State	Zip Code
FORT MORGAN	CO	80701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120784**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SALLY CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120786**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SALLY CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120787**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SALLY CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120788**

Date of Receipt

**07** / **29** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM W CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.120790**

Date of Receipt

**07** / **29** / **2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM W CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120791**

Date of Receipt

**07** / **29** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

10800.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM W CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120792**

Date of Receipt

**07** / **29** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM W CANFIELD**

Mailing Address 9034 SEDGWICK PLACE

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120793**

Date of Receipt

**07** / **29** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK CANNELLA**

Mailing Address 848 LIBERTY DRIVE

City	State	Zip Code
BURLINGTON	WI	53105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CANNELLA RESPONSE

Occupation  
ADVERTISING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120795**

Date of Receipt

**08** / **12** / **2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2700.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL G CANNING**

Mailing Address 1650 BALMORAL CIRVLE

City	State	Zip Code
INVERNESS	IL	60067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CDW

Occupation  
MANAGER COMPENSATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129120**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2015			

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL G CANNING**

Mailing Address 1650 BALMORAL CIRVLE

City	State	Zip Code
INVERNESS	IL	60067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CDW

Occupation  
MANAGER COMPENSATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129120.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2015			

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL G CANNING**

Mailing Address 1650 BALMORAL CIRVLE

City	State	Zip Code
INVERNESS	IL	60067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CDW

Occupation  
MANAGER COMPENSATION

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129120.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2015			

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)

**TIMOTHY M CANNING**

Mailing Address 1910 W NORTH AVENUE, SUITE 300

City	State	Zip Code
CHICAGO	IL	60622

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE LEMON TREE**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129124**

Date of Receipt

**09** / **18** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

**TIMOTHY M CANNING**

Mailing Address 1910 W NORTH AVENUE, SUITE 300

City	State	Zip Code
CHICAGO	IL	60622

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE LEMON TREE**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129124.0**

Date of Receipt

**09** / **18** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)

**TIMOTHY M CANNING**

Mailing Address 1910 W NORTH AVENUE, SUITE 300

City	State	Zip Code
CHICAGO	IL	60622

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE LEMON TREE**

Occupation  
**OWNER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129124.1**

Date of Receipt

**09** / **18** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ELIZABETH CANNING LUPO**

Mailing Address 106 SOUTH HOME

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE CRADLE

Occupation  
INTAKE COORDINATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129118**

Date of Receipt

**09** / **18** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ELIZABETH CANNING LUPO**

Mailing Address 106 SOUTH HOME

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE CRADLE

Occupation  
INTAKE COORDINATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129118.0**

Date of Receipt

**09** / **18** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ELIZABETH CANNING LUPO**

Mailing Address 106 SOUTH HOME

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE CRADLE

Occupation  
INTAKE COORDINATOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129118.1**

Date of Receipt

**09** / **18** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN CANNON**

Mailing Address 2928 CLAREMONT RD.

City	State	Zip Code
SHAKER HTS.	OH	44122

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
STOCK TRADER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.120796**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN CANNON**

Mailing Address 455 LEDGEWOOD DRIVE

City	State	Zip Code
FOND DU LAC	WI	54937

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120798**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN F CANNON**

Mailing Address 10 OLD JACKSON AVENUE #49

City	State	Zip Code
HASTINGS-ON-HUDSON	NY	10706

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120800**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 247 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN F CANNON**

Mailing Address 10 OLD JACKSON AVENUE #49

City	State	Zip Code
HASTINGS-ON-HUDSON	NY	10706

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120801**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT CANNON**

Mailing Address 348 TURRET DR

City	State	Zip Code
ROCK SPRINGS	WY	82901

FEC ID number of contributing federal political committee.

C

Name of Employer  
CANNON OIL & GAS

Occupation  
CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120803**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TED CANNON**

Mailing Address 71 BLUEJAY

City	State	Zip Code
IRVINE	CA	92604

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120805**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN CANTRELL**

Mailing Address **333 ELIZABETH ROAD**

City	State	Zip Code
TERRELL HILLS	TX	78209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**216.00**

**Transaction ID : SA17A.120807**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		25		2015

Amount of Each Receipt this Period

**216.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AMY E CAPE**

Mailing Address **4908 3 MILE ROAD**

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CORNERSTONE PAVERS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMY E CAPE**

Mailing Address **4908 3 MILE ROAD**

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CORNERSTONE PAVERS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.120810**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1716.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH CAPITANI**

Mailing Address 1411 COURTLAND

City	State	Zip Code
PARKRIDGE	IL	60068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120812**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PAUL CAPRIO**

Mailing Address 414 N ORLEANS ST

City	State	Zip Code
CHICAGO	IL	60654

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PAUL CAPRIO & ASSOCIATES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120814**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARCIA S CARABELL**

Mailing Address 911 SEAGATE DR

City	State	Zip Code
DELRAY BEACH	FL	33483

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120816**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGETT S CARBAJAL**

Mailing Address 1420 HIGHLAND DRIVE

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETAIL MERCHANDISING SERVICES

Occupation  
TRAINER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120818**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RHONDA CARDELLA**

Mailing Address 1602 E JUNIPER WAY

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120820**

Date of Receipt

**07 / 06 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS J CARDELLA**

Mailing Address 1602 E JUNIPER WAY

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MILLERCOORS

Occupation  
PRESIDENT: EASTERN DIVISION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120822**

Date of Receipt

**07 / 06 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS J CARDELLA**

Mailing Address 1602 E JUNIPER WAY

City

HARTLAND

State

WI

Zip Code

53029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MILLERCOORS

Occupation

PRESIDENT: EASTERN DIVISION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120823**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 06 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIM CARDON**

Mailing Address 11 HILLAIR CT

City

WHITE PLAINS

State

NY

Zip Code

10605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CISCO

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120825**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUG CAREY**

Mailing Address 2200 BRIENZ VALLEY D

City

FRANKLIN

State

TN

Zip Code

37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CSI, LLC

Occupation

ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120827**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DR. ANN CARLI**

Mailing Address **2490 BRENNER PL**

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ADVANCED EYECARE CENTER**

Occupation  
**OPTOMETRIST/OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**260.00**

**Transaction ID : SA17A.120828**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		25		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES CARLSON**

Mailing Address **1504 MARSHA AVE**

City	State	Zip Code
MODESTO	CA	95350

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120830**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES CARLSON**

Mailing Address **1504 MARSHA AVE**

City	State	Zip Code
MODESTO	CA	95350

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120831**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**750.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY CARLTON**

Mailing Address 4308 LEALAND LN

City	State	Zip Code
NASHVILLE	TN	37204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BUNTIN GROUP**

Occupation  
**ADVERTISING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.120832**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL CARLTON**

Mailing Address 330 BOUNDARY PLACE

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIMEDX**

Occupation  
**MEDICAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120834**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE CARMICHAEL**

Mailing Address 4901 WORNALL ROAD APT 902

City	State	Zip Code
KANSAS CITY	MO	64112

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120835**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE CARMICHAEL**

Mailing Address 4901 WORNALL ROAD APT 902

City	State	Zip Code
KANSAS CITY	MO	64112

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120836**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE CARMICHAEL**

Mailing Address 4901 WORNALL ROAD APT 902

City	State	Zip Code
KANSAS CITY	MO	64112

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120837**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIMOTHY CARMON**

Mailing Address 61 RAINBOW TRAIL

City	State	Zip Code
SOUTH WINDSOR	CT	06074

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120839**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN CARNEY**

Mailing Address 1202 W TEXAS AVENUE

City	State	Zip Code
MIDLAND	TX	79701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120841**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			09			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL CARPENTER**

Mailing Address 656 W EVERGREEN COURT

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120843**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			01			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL CARPENTER**

Mailing Address 656 W EVERGREEN COURT

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120844**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			01			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL CARPENTER**

Mailing Address 7726 LEW HOAD AVE

City	State	Zip Code
BATON ROUGE	LA	70810

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120846**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS CARRABINE**

Mailing Address 893 BEVERLY PLACE

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120848**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 23 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID CARROLL**

Mailing Address 501 STREET DAVIDS LANE

City	State	Zip Code
NISKAYUDA	NY	12309

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120850**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABETH CARROLL**

Mailing Address 10316 TOBIAS LANE

City	State	Zip Code
FRISCO	TX	75053

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120852**

Date of Receipt

**08 / 30 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHILIP CARROLL**

Mailing Address 407 CHERRY STREET

City	State	Zip Code
BIRMINGHAM	AL	35213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bradley Arant Boulton Cummings

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120854**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GLENN CARSON**

Mailing Address 156 COE RD

City	State	Zip Code
BELLEAIR	FL	33756

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120856**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 258 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER CARTER**

Mailing Address 5610 S 110TH STREET

City	State	Zip Code
HALES CORNERS	WI	53130

FEC ID number of contributing federal political committee.

C

Name of Employer  
APPROYO

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120858**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER CARTER**

Mailing Address 5610 S 110TH STREET

City	State	Zip Code
HALES CORNERS	WI	53130

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.00

**Transaction ID : SA17A.120859**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

253.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EUGENE T CARTER**

Mailing Address 600 W TOUHY AVENUE, UNIT 307

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120861**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1503.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFF CARTER**

Mailing Address 60 E MONROE #2604

City	State	Zip Code
CHICAGO	IL	60603

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120863**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KIRSTEN CARTER**

Mailing Address 39461 EVERGREEN

City	State	Zip Code
AVON	OH	44011

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120865**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL CARTER**

Mailing Address 400 OCEANGATE, STE 800

City	State	Zip Code
LONG BEACH	CA	90802

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120867**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD CARTER**

Mailing Address 935 WINDSOR ROAD

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120869**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN CARTWRIGHT**

Mailing Address 414 SOUTH MUIRFIELD ROAD

City	State	Zip Code
LOS ANGELES	CA	90020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120871**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER CASE**

Mailing Address 2 BURTON LANE

City	State	Zip Code
KINGSTON	MA	02364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.120873**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1550.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES CASEY**

Mailing Address **22 ENCHANTED WOODS D**

City	State	Zip Code
KINGWOOD	TX	77339

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EXXON MOBIL CORPORATION**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120875**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHERYL CASEY**

Mailing Address **N1138 JULIUS DR**

City	State	Zip Code
GREENVILLE	WI	54942

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COUNTRY HOUSE RESORT**

Occupation  
**VP & CO-OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120877**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHRIS CASHMAN**

Mailing Address **229 SOUTHERN HILL DRIVE**

City	State	Zip Code
JOHNS CREEK	GA	30097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MIMEDX**

Occupation  
**EXECUTIVE VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.120879**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1750.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**EVERETT CASSEL**

Mailing Address **277 MCINTOSH RD**

City State Zip Code  
**WEST CHESTER PA 19382**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.120880**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GARY CASTEEL**

Mailing Address **1350 STATE ROUTE 88**

City State Zip Code  
**MINDEN NV 89423**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RANCHING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120882**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ARMANDO CASTELLINI**

Mailing Address **78 DIAMOND SPRING RD**

City State Zip Code  
**DENVILLE NJ 07834**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INSURANCE CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120884**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**600.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 263 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**BARBARA CASTER**

Mailing Address **634 CREST DR**

City State Zip Code  
**EL CAJON CA 92019**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BARBARA CASTER**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120886**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VERNON CASTERLINE**

Mailing Address **3215 N DEKOVEN DR.**

City State Zip Code  
**OCONOMOWOC WI 53066**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LAYTON AVE. DERMATOLOGY**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120888**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROBERTO CASTILLO**

Mailing Address **483 GREEN MOUNTAIN RD**

City State Zip Code  
**MAHWAH NJ 07430**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SWI**

Occupation  
**MORALE SUPERVISER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**-3.00**

**Transaction ID : SA17A.22357**

Date of Receipt

**07 / 12 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

**-3.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2947.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERTO CASTILLO**

Mailing Address 483 GREEN MOUNTAIN RD

City	State	Zip Code
MAHWAH	NJ	07430

FEC ID number of contributing federal political committee.

C

Name of Employer  
SWI

Occupation  
MORALE SUPERVISER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-5.00

**Transaction ID : SA17A.22358**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 12 / 2015

**CHARGEBACK**

Amount of Each Receipt this Period

-2.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERTO CASTILLO**

Mailing Address 483 GREEN MOUNTAIN RD

City	State	Zip Code
MAHWAH	NJ	07430

FEC ID number of contributing federal political committee.

C

Name of Employer  
SWI

Occupation  
MORALE SUPERVISER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-8.00

**Transaction ID : SA17A.22359**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 12 / 2015

**CHARGEBACK**

Amount of Each Receipt this Period

-3.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERTO CASTILLO**

Mailing Address 483 GREEN MOUNTAIN RD

City	State	Zip Code
MAHWAH	NJ	07430

FEC ID number of contributing federal political committee.

C

Name of Employer  
SWI

Occupation  
MORALE SUPERVISER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-9.00

**Transaction ID : SA17A.22360**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-6.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT P CASTRIGNAN**

Mailing Address 157 IDLEWOOD DRIVE

City	State	Zip Code
STAMFORD	CT	06905

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.120890**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT P CASTRIGNAN**

Mailing Address 157 IDLEWOOD DRIVE

City	State	Zip Code
STAMFORD	CT	06905

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.120891**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES CASWELL**

Mailing Address 122 OLD IVY RD NE

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PC ASSOC

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120893**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

7700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BUCK CATER**

Mailing Address 3756 E FAIRWAY DRIVE

City	State	Zip Code
BIRMINGHAM	AL	35213

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.120895**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN A CATSIMATID**

Mailing Address 817 5TH AVE

City	State	Zip Code
NEW YORK	NY	10065

FEC ID number of contributing federal political committee.

C

Name of Employer  
GRISTEDES

Occupation  
CHAIRMAN, PRESIDENT, & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120897**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGO CATSIMATID**

Mailing Address 817 5TH AVE

City	State	Zip Code
NEW YORK	NY	10065

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120899**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5620.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ENRICO CECCHI**

Mailing Address **1236 MEYER COURT**

City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE IDI GROUP**

Occupation  
**VICE PRESIDENT & COUNCIL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120901**

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GIUSEPPE CECCHI**

Mailing Address **1209 ALDEBARAN DRIVE**

City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**IDI GROUP COMPANIES**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120903**

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN CECCHI**

Mailing Address **3321 N STREET NW**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20007</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**IDI GROUP**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.120905**

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**8100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MERCEDES CECCHI**

Mailing Address 1209 ALDEBARAN DRIVE

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MALENA IMPORTS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120907**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALBERT CELLERI**

Mailing Address 12 WADAMS COURT

City	State	Zip Code
WEST ORANGE	NJ	07052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120909**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			01			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ARDIS CERNY**

Mailing Address 3037 E OAKMONT COURT B

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120911**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			10			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3200.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICARDO CESPED**

Mailing Address 970 WEDGE CT

City	State	Zip Code
INCLINE VILLA	NV	89451

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120913**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICARDO CESPED**

Mailing Address 970 WEDGE CT

City	State	Zip Code
INCLINE VILLA	NV	89451

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.120914**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVE CHAI**

Mailing Address 2033 SHARPLESS DR

City	State	Zip Code
LA HABRA HEIG	CA	90631

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SANTOS ELECTRONICS, INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120916**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT CHALLEY**

Mailing Address 2960 CAMINO DIABLO STE 300

City	State	Zip Code
WALNUT CREEK	CA	94597

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120918**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 04 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RUTH CHAMBERS**

Mailing Address 7010 WILDGROVE AVE

City	State	Zip Code
DALLAS	TX	75214

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE INVESTMENTS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120920**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NORMAN B CHAMP**

Mailing Address 829 PARK AVE APT 5B

City	State	Zip Code
NEW YORK	NY	10021

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHAMP REALTY CO.

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120922**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 18 / 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CRAIG CHANDLER**

Mailing Address 5374 SUGAR HILL DRIVE

City	State	Zip Code
HOUSTON	TX	77056

FEC ID number of contributing federal political committee.

C

Name of Employer  
POWERSITE LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120924**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOANNE CHAO**

Mailing Address 5918 TURNBERRY DRIVE  
D

City	State	Zip Code
DUBLIN	CA	00000

FEC ID number of contributing federal political committee.

C

Name of Employer  
KAISER PERMANENTE

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120926**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DIANE CHAPMAN**

Mailing Address W6717 COUNTY ROAD P

City	State	Zip Code
ENDEAVOR	WI	53930

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120928**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN W CHAPMAN**

Mailing Address 331 SOUTH MAIN STREET

City	State	Zip Code
WASHINGTON	PA	15301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CHAPMAN PLUMBING AND HEATING INC**

Occupation  
**PRESIDENT/DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.120929**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREGORY CHARLOP**

Mailing Address 725 GELSTON PL

City	State	Zip Code
EL CERRITO	CA	94530

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KAISER**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120931**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JR DERWOOD S CHASE**

Mailing Address 300 PRESTON AVENUE  
STE 500

City	State	Zip Code
CHARLOTTESVILLE	VA	22902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120933**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

**EARMARKED THROUGH CLUB FOR GROWTH PAC**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN CHATHAM**

Mailing Address 1220 MARY HILL CIRCLE

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

C

Name of Employer  
HSD

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120935**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN CHATWIN**

Mailing Address 6608 INDEPENDENCE AVE

City	State	Zip Code
SPRINGFIELD	VA	22151

FEC ID number of contributing federal political committee.

C

Name of Employer  
U.S. HOUSE OF REPRESENTATIVES

Occupation  
CHIEF OF STAFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120937**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARI S CHEEMA**

Mailing Address

City	State	Zip Code
PITTSBURGH	PA	

FEC ID number of contributing federal political committee.

C

Name of Employer  
MITSUBISHI ELECTRIC POWER  
PRODUCTS INC

Occupation  
GENERAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120939**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES E CHEEVER**

Mailing Address 11112 MONMOUTH

City	State	Zip Code
SAN ANTONIO	TX	78239

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120941**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY J CHEEVER**

Mailing Address 11112 MONMOUTH

City	State	Zip Code
SAN ANTONIO	TX	78239

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120943**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARVIN H CHEITEN**

Mailing Address 35 MEADOWBROOK DR

City	State	Zip Code
PRINCETON	NJ	08540

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
WRITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120945**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARVIN H CHEITEN**

Mailing Address 35 MEADOWBROOK DR

City	State	Zip Code
PRINCETON	NJ	08540

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
WRITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120946**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HONG CHEN**

Mailing Address 729 S JACKSON ST

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UNIVERSITY OF ILLINOIS CHICA

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.120948**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

750.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NELSON CHENAUR**

Mailing Address 26617 212 AVE SE

City	State	Zip Code
COVINGTON	WA	98042

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120950**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES CHENG**

Mailing Address 8912 OLD DOMINION DR

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee.

C

Name of Employer  
LEE AND HAYES

Occupation  
ATTY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120952**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES CHENG**

Mailing Address 8912 OLD DOMINION DR

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee.

C

Name of Employer  
LEE AND HAYES

Occupation  
ATTY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128806**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEANETTE CHENG**

Mailing Address 8912 OLD DOMINION DR

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128808**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW CHESNEY**

Mailing Address **960 WOODSIDE TERRACE**

City <b>FREEPORT</b>	State <b>IL</b>	Zip Code <b>61032</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SEAGA**

Occupation  
**DIVISION SALES MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120954**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DALTON CHESTER**

Mailing Address **25207 CALLAWAY**

City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78260</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TEXAS TRUCK CENTERS**

Occupation  
**TEXAS TRUCK CENTERS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120956**

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DALTON CHESTER**

Mailing Address **25207 CALLAWAY**

City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78260</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TEXAS TRUCK CENTERS**

Occupation  
**TEXAS TRUCK CENTERS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**550.00**

**Transaction ID : SA17A.120957**

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**800.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID B CHESTER**

Mailing Address PO BOX 111

City

GAINESVILLE

State

GA

Zip Code

30503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILHEIT PACKAGING

Occupation

VICE PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120959**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

17

2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT CHESTER**

Mailing Address 405 E 13TH ST

City

LAUREL

State

MT

Zip Code

59044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CMG CONSTRUCTION

Occupation

OWNER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120961**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2015

09

2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT CHESTER**

Mailing Address 405 E 13TH ST

City

LAUREL

State

MT

Zip Code

59044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CMG CONSTRUCTION

Occupation

OWNER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.120962**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2015

28

2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL CHIARAMONT**

Mailing Address 510 CATHEDRAL DR

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOSPITAL CENTER

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120964**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDY CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.120966**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDY CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128923**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

11300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 280 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUDY CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.128924**

Date of Receipt

**08 / 04 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDY CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128925**

Date of Receipt

**08 / 04 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDY CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128928**

Date of Receipt

**08 / 04 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128927**

Date of Receipt

**08 / 04 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD CHILDRESS**

Mailing Address 9160 HAMPTON ROAD

City	State	Zip Code
LEXINGTON	NC	27295

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128929**

Date of Receipt

**08 / 04 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHIMICLES & TIKELLIS LLP**

Mailing Address 361 W LANCASTER AVENUE

City	State	Zip Code
HAVERFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120968**

Date of Receipt

**07 / 31 / 2015**

LLP INFORMATION REQUESTED

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT CHIPMAN**

Mailing Address **2247 EMERALD STREET**

City	State	Zip Code
SAN DIEGO	CA	92109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DESIGN SYNTHESIES**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.120970**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

**750.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WALTON CHISOLM**

Mailing Address **KAROLINENSTR. 12**

City	State	Zip Code
BERLIN		14165

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROLLS-ROYCE**

Occupation  
**TECHNICAL LEAD S1000D**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.120972**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DENISE CHIUMENTO**

Mailing Address **PO BX 1835**

City	State	Zip Code
KINGSTON	NY	12402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CYBERSONICS INC**

Occupation  
**REGISTERED CARDIAC SONOGRAPHER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120974**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1500.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PEGGY CHMIELEWSKI**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120976**

Date of Receipt

**09 / 24 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARMEANE CHOKSI**

Mailing Address 2340 KALORAMA ROAD NW

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120978**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD J CHRISMER**

Mailing Address 610 FOREST CT

City

CLAYTON

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SEEN READ HEARD

Occupation  
PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120980**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH CHRISTENSE**

Mailing Address **2417 HARRIS AVE**

City	State	Zip Code
<b>RICHLAND</b>	<b>WA</b>	<b>99354</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.120981**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>13</b>		<b>2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEITH CHRISTENSE**

Mailing Address **2417 HARRIS AVE**

City	State	Zip Code
<b>RICHLAND</b>	<b>WA</b>	<b>99354</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00**

**Transaction ID : SA17A.120982**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>28</b>		<b>2015</b>

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAMIEN CHRISTIAN**

Mailing Address **14802 NE 117TH CIRCLE**

City	State	Zip Code
<b>VANCOUVER</b>	<b>WA</b>	<b>98682</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**DISABLED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.120984**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>13</b>		<b>2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**600.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TORBEN CHRSTENSEN**

Mailing Address 6116 LEEWARD LANE

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

C

Name of Employer  
WISCON PRODUCTS INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120986**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE J CIBULA, JR.**

Mailing Address 970 N OAKLAWN AVENUE, STE 100

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.120988**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VIRGIL CIHLA**

Mailing Address 3601 EAGLE BEND

City	State	Zip Code
PEKIN	IL	61554

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.120990**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LYNETTE CLACK**

Mailing Address 6679 HIGHLAND DRIVE

City	State	Zip Code
WINDSOR	WI	53598

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CLACK FOUNDATION**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120992**

Date of Receipt

**09 / 02 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD E CLACK**

Mailing Address 6679 HIGHLAND DR

City	State	Zip Code
WINDSOR	WI	53598

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CLACK CORP**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.120994**

Date of Receipt

**09 / 02 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD E CLACK**

Mailing Address 6679 HIGHLAND DR

City	State	Zip Code
WINDSOR	WI	53598

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CLACK CORP**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.120995**

Date of Receipt

**09 / 02 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**D'ARCY R CLAIRE**

Mailing Address 515 - 16TH AVENUE NE

City	State	Zip Code
ST. PETERSBURG	FL	33704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CLAIRE LAW OFFICES PA

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120997**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN CLARK**

Mailing Address 405 PECAN DR

City	State	Zip Code
SCHERTZ	TX	78154

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-10.00

**Transaction ID : SA17A.23813**

Date of Receipt

**07 / 03 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT W CLARK**

Mailing Address 6110 STATE HIGHWAY 13 S

City	State	Zip Code
WISCONSIN RAP	WI	54494

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.120999**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

490.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM J. CLARK**

Mailing Address 3419 HILLTOP DR

City	State	Zip Code
ST CHARLES	MO	63301

FEC ID number of contributing federal political committee.

C

Name of Employer  
MASTERCLOCK, INC

Occupation  
PRESIDENT & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121001**

Date of Receipt

MM / DD / YYYY  
06 / 18 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAMELA CLAYPOOL**

Mailing Address 12448 BENTBROOK DRIVE

City	State	Zip Code
CHESTERLAND	OH	44026

FEC ID number of contributing federal political committee.

C

Name of Employer  
AIRGAS

Occupation  
DIV PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121003**

Date of Receipt

MM / DD / YYYY  
06 / 20 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAMELA CLAYPOOL**

Mailing Address 12448 BENTBROOK DRIVE

City	State	Zip Code
CHESTERLAND	OH	44026

FEC ID number of contributing federal political committee.

C

Name of Employer  
AIRGAS

Occupation  
DIV PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121004**

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH P CLAYTON**

Mailing Address 3516 CLUB ESTATES DR

City	State	Zip Code
CARMEL	IN	46033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121006**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN CLEARWATER**

Mailing Address 52 GOVERNORS LN

City	State	Zip Code
PRINCETON	NJ	08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.121007**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRUCE CLEMENTS**

Mailing Address 1614 NORFOLK #C

City	State	Zip Code
HOUSTON	TX	77006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.121008**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HARRY CLEMENTS, JR.**

Mailing Address 5976 SHAW HIGHWAY

City	State	Zip Code
ROCKY POINT	NC	28457

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121010**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA CLEMMONS**

Mailing Address 4601 HAMBLIN CT.

City	State	Zip Code
SEABROOK	TX	77586

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121012**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE CLEVELAND**

Mailing Address 224 CAMPBELL PLACE

City	State	Zip Code
JACKSONVILLE	NC	28546

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.121013**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUG CLEVINGER**

Mailing Address 4825 CAROLINA BEACH

City	State	Zip Code
WILMINGTON	NC	28412

FEC ID number of contributing federal political committee.

C

Name of Employer  
BOY SCOUTS OF AMERICA

Occupation  
EXECUTIVE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121015**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRYAN CLINE**

Mailing Address 3211 SCHOOL LANE

City	State	Zip Code
DREXEL HILL	PA	19026

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
INFORMATION SECURITY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.121017**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PEGGY CLINE**

Mailing Address PO BOX 3966

City	State	Zip Code
HICKORY	NC	28603

FEC ID number of contributing federal political committee.

C

Name of Employer  
DALE K CLINE CPA PLLC.

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121019**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

720.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLUB FOR GROWTH PAC**

Mailing Address 2001 L ST NW SUITE 600

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C** C00432260

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

975.00

**Transaction ID : SA17A.121021**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

975.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLUB FOR GROWTH PAC**

Mailing Address 2001 L ST NW SUITE 600

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C** C00432260

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1950.00

**Transaction ID : SA17A.121022**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

975.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CLUB FOR GROWTH PAC**

Mailing Address 2001 L ST NW SUITE 600

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C** C00432260

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2145.00

**Transaction ID : SA17A.121023**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

195.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLUB FOR GROWTH PAC**

Mailing Address 2001 L ST NW SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00432260

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3144.38

**Transaction ID : SA17A.121024**

Date of Receipt

**MM / DD / YYYY**  
09 / 07 / 2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

999.38

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLUB FOR GROWTH PAC**

Mailing Address 2001 L ST NW SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00432260

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3168.76

**Transaction ID : SA17A.121025**

Date of Receipt

**MM / DD / YYYY**  
09 / 07 / 2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

24.38

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER CLUER**

Mailing Address 301 MISSION AVE  
5

City

OCEANSIDE

State

CA

Zip Code

92054

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

ADAPTECH

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121027**

Date of Receipt

**MM / DD / YYYY**  
06 / 19 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER CLUER**

Mailing Address 301 MISSION AVE  
5

City State Zip Code  
OCEANSIDE CA 92054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADAPTECH

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121028**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WALTER CLUER**

Mailing Address 301 MISSION AVE  
5

City State Zip Code  
OCEANSIDE CA 92054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADAPTECH

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121029**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER CLUER**

Mailing Address 301 MISSION AVE  
5

City State Zip Code  
OCEANSIDE CA 92054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADAPTECH

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.121030**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 27 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER CLUER**

Mailing Address 301 MISSION AVE  
5

City State Zip Code  
OCEANSIDE CA 92054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADAPTECH

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.121031**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LOU CLUSTER**

Mailing Address 1565 MEADOWVIEW LN

City State Zip Code  
RENO NV 89509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121033**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHERRI COATS**

Mailing Address 10 JOAQUIN ROAD

City State Zip Code  
PORTOLA VALLEY CA 94028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

263.00

**Transaction ID : SA17A.121034**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

181.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2931.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS COBB**

Mailing Address 1467 LOCHRIDGE

City	State	Zip Code
BLOOMFIELD HILLS	MI	48302

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121036**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FELIX COBIAN**

Mailing Address 1360 JASMINE LN

City	State	Zip Code
LANCASTER	PA	17601

FEC ID number of contributing federal political committee.

C

Name of Employer  
NEW WRINL

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121038**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTY COE**

Mailing Address 2315 N. WALNUT RD.

City	State	Zip Code
ROCHESTER	IL	62563

FEC ID number of contributing federal political committee.

C

Name of Employer  
COE EQUIPMENT

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121039**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERTA COFFEY**

Mailing Address 108 PINE VALLEY DR

City

AVONDALE

State

PA

Zip Code

19311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.121040**

Date of Receipt

09

15

2015

Amount of Each Receipt this Period

110.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL COFONI**

Mailing Address 2 KETTLE CLOSE

City

WESTERLY

State

RI

Zip Code

02891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121041**

Date of Receipt

07

13

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK COHEN**

Mailing Address 200 EAST 71ST STREET, APT 9H

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121043**

Date of Receipt

07

13

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

610.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MIKE COHEN**

Mailing Address 14 OAK GLEN RD

City	State	Zip Code
TOMS RIVER	NJ	08753

FEC ID number of contributing federal political committee.

C

Name of Employer  
CWR ELECTRONICS INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121045**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MIKE COHEN**

Mailing Address 14 OAK GLEN RD

City	State	Zip Code
TOMS RIVER	NJ	08753

FEC ID number of contributing federal political committee.

C

Name of Employer  
CWR ELECTRONICS INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121046**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SETH COHEN**

Mailing Address 11 CANTERBURY CT

City	State	Zip Code
UPPER SADDLE RIVER	NJ	07458

FEC ID number of contributing federal political committee.

C

Name of Employer  
ELEVEN CANTERBURY LLC

Occupation  
MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121048**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN COHEN**

Mailing Address 1024 BOBWHITE DR

City

CHERRY HILL

State

NJ

Zip Code

08003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTH JERSEY PROSTHODONTIC ASSOC.

Occupation

DENTIST

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121050**

Date of Receipt

07

13

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAROL COKER**

Mailing Address 4405 FM 2943

City

HEREFORD

State

TX

Zip Code

79045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEREFORD DIALYSIS CENTER

Occupation

REGISTERED NURSE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121051**

Date of Receipt

09

01

2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID COLBURN**

Mailing Address 600 N FAIRBANKS CT #2402

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CED MANAGEMENT SERVICE

Occupation

EXECUTIVE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121053**

Date of Receipt

08

11

2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARIS P COLE**

Mailing Address PO BOX 491

City	State	Zip Code
BRYN ATHYN	PA	19009

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.121054**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EILEEN COLEMAN**

Mailing Address 8310 WARREN DR NW

City	State	Zip Code
GIG HARBOR	WA	98335

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121056**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN COLEMAN**

Mailing Address 6100 W. 82ND PLACE

City	State	Zip Code
BURBANK	IL	60459

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121058**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**M. THOMAS COLINS**

Mailing Address 333 LAKE VALLEY DRIVE

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121060**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAWRENCE COLLETT**

Mailing Address 1231 GLEN EAGLE LANE  
S

City	State	Zip Code
ST. ALBANS	MO	00000

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CASE INFORMATION SYSTEMS INC

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121062**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BONNY COLLINS**

Mailing Address 2466 ROARING FORK DR

City	State	Zip Code
GRAND JUNCTION	CO	81505

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121063**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL P COLLINS**

Mailing Address 520 E MARIPOSA ST

City	State	Zip Code
ALTADENA	CA	91001

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MUNGER, TOLLES & OLSON LLP**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121065**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEITH COLLINS**

Mailing Address 407 E FRANKLIN ST

City	State	Zip Code
LANARK	IL	61046

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EYE CARE FOR ANIMALS**

Occupation  
**VETERINARIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121067**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NICOLAS COLORADO**

Mailing Address 507 OAKFIELD DRIVE

City	State	Zip Code
BRANDON	FL	33511

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**M.D.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121069**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE COMPTON**

Mailing Address 2603 MONTEVALLO ROAD

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121071**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL COMPTON**

Mailing Address 2603 MONTEVALLO RD

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BRADLEY ARANT BOULT CUMMINGS LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121073**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY L CONKEY**

Mailing Address 6247 CALLE MONTALVO

City	State	Zip Code
GRANITE BAY	CA	95746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINCOLN CLUB OF PLACER COUNT

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121075**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY L CONKEY**

Mailing Address 6247 CALLE MONTALVO

City	State	Zip Code
GRANITE BAY	CA	95746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINCOLN CLUB OF PLACER COUNT

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121076**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY L CONKEY**

Mailing Address 6247 CALLE MONTALVO

City	State	Zip Code
GRANITE BAY	CA	95746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINCOLN CLUB OF PLACER COUNT

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121077**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY L CONKEY**

Mailing Address 6247 CALLE MONTALVO

City	State	Zip Code
GRANITE BAY	CA	95746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINCOLN CLUB OF PLACER COUNT

Occupation  
CHAIRMAN

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121078**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CURT CONKLIN**

Mailing Address 1942 N WOLCOTT AVE

City	State	Zip Code
CHICAGO	IL	60622

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121080**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HEATHER CONLEY**

Mailing Address 3404 LELAND STREET

City	State	Zip Code
CHEVY CHASE	MD	20815

FEC ID number of contributing federal political committee.

C

Name of Employer  
CENTER FOR STRATEGIC AND  
INTERNATIONAL

Occupation  
FOREIGN POLICY ANALYST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT K CONLON**

Mailing Address N1545 WILLOW BROOK R

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
LAKE GENEVA ORAL SURGERY LTD

Occupation  
ORAL SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121084**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD CONN**

Mailing Address 6713 CATSKILL RD

City	State	Zip Code
LORTON	VA	22079-1113

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CONN & SMITH, INC.

Occupation  
REGULATORY CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121085**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL CONNELL**

Mailing Address W375 S4923 E. PRETTY LAKE RD.

City	State	Zip Code
DOUSMAN	WI	53118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121087**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TODD CONNELL**

Mailing Address W250 S7255 CENTER DRIVE

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ORTHODONTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121089**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3025.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 307 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA CONNER**

Mailing Address 11415 SAGESTANLEY DR

City	State	Zip Code
HOUSTON	TX	77089

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121090**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAYBURN CONNER**

Mailing Address 9421 APOLLO RD

City	State	Zip Code
BLOOMINGTON	IL	61705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.121091**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYBURN CONNER**

Mailing Address 9421 APOLLO RD

City	State	Zip Code
BLOOMINGTON	IL	61705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.121092**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RAYBURN CONNER**

Mailing Address 9421 APOLLO RD

City	State	Zip Code
BLOOMINGTON	IL	61705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

**Transaction ID : SA17A.121093**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAYBURN CONNER**

Mailing Address 9421 APOLLO RD

City	State	Zip Code
BLOOMINGTON	IL	61705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

**Transaction ID : SA17A.121094**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYBURN CONNER**

Mailing Address 9421 APOLLO RD

City	State	Zip Code
BLOOMINGTON	IL	61705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

460.00

**Transaction ID : SA17A.121095**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL CONNOR**

Mailing Address 9360 NORTH SPRUCE RD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121096**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RONALD CONNORS**

Mailing Address 132 ELDERFIELDS ROAD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121098**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J.M. CONOYER**

Mailing Address 19 LAKE FOREST CIRCLE

City	State	Zip Code
ST. CHARLES	MO	63301

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIDWEST ENT

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121100**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN M CONOYER**

Mailing Address 1025 WINDWARD PSGE

City	State	Zip Code
SAINT CHARLES	MO	63303

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIDWEST ENT**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121102**

Date of Receipt

**07** / **29** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVE S CONRAD**

Mailing Address 1104 CONRAD RD

City	State	Zip Code
BRANDYWINE	WV	26802

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.121104**

Date of Receipt

**07** / **31** / **2015**

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TED CONRAD**

Mailing Address 24260 W 112TH TER

City	State	Zip Code
OLATHE	KS	66061

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121106**

Date of Receipt

**07** / **14** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM CONWAY**

Mailing Address 32400 FAIRMOUNT BLVD

City	State	Zip Code
PEPPER PIKE	OH	44124

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.121107**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM CONWAY**

Mailing Address 32400 FAIRMOUNT BLVD

City	State	Zip Code
PEPPER PIKE	OH	44124

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

**Transaction ID : SA17A.121108**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA COOK**

Mailing Address 2939 25TH ST

City	State	Zip Code
SACRAMENTO	CA	95818

FEC ID number of contributing federal political committee.

C

Name of Employer  
DEPT OF AIR FORCE

Occupation  
SECURITY SPECIALIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121110**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENDA COOK**

Mailing Address 2669 HOLLY POINT RD EAST

City	State	Zip Code
ORANGE PARK	FL	32073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121112**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID E COOK**

Mailing Address 2817 COUNTRYWOOD LN

City	State	Zip Code
WEST COVINA	CA	91791

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
D. C. CORPORATION

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121114**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUZANNE COOK**

Mailing Address 114 DARROW DR

City	State	Zip Code
PENNINGTON	NJ	08534

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121115**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUZANNE COOK**

Mailing Address 114 DARROW DR

City

PENNINGTON

State

NJ

Zip Code

08534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121116**

Date of Receipt

MM / DD / YYYY  
08 / 29 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUZANNE COOK**

Mailing Address 114 DARROW DR

City

PENNINGTON

State

NJ

Zip Code

08534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121117**

Date of Receipt

MM / DD / YYYY  
09 / 17 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARD COOK**

Mailing Address 13611 SE RIVERCREST DR

City

VANCOUVER

State

WA

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121119**

Date of Receipt

MM / DD / YYYY  
07 / 24 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WARD COOK**

Mailing Address 13611 SE RIVERCREST DR

City	State	Zip Code
VANCOUVER	WA	98683

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.121120**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFF COOKE**

Mailing Address 1420 E ROSEVILLE PKWY #140-322

City	State	Zip Code
ROSEVILLE	CA	95661

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SOFTWARE DEVELOPMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121122**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM COOKSEY**

Mailing Address 979 PARK LANE ROAD

City	State	Zip Code
AUBURN	AL	36830

FEC ID number of contributing federal political committee.

C

Name of Employer  
SOUTHEAST MAINTENANCE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121124**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**M. COOLEY**

Mailing Address 1111 CAROLINE STREET, SUITE 2707

City	State	Zip Code
HOUSTON	TX	77010

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121126**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTIAN COOPER**

Mailing Address PO BOX 2199

City	State	Zip Code
JASPER	TN	37347

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

**Transaction ID : SA17A.121128**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

330.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEBRA COOPER**

Mailing Address 351 E 51ST ST

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121130**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6730.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DEBRA COOPER**

Mailing Address 351 E 51ST ST

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121131**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FREDERIC E COOPER**

Mailing Address PO BOX 30355

City	State	Zip Code
ATLANTA	GA	30332

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GEORGIA RESEARCH ALLIANCE VE

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121133**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE " COOPER**

Mailing Address 129 PATRICIA LEE CT

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMERGING-TRUST

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121135**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2950.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 317 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARC COOPER**

Mailing Address **351 E 51ST ST**  
**A**

City **NEW YORK** State **NY** Zip Code **10022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PETER J SOLOMON COMPANY**

Occupation  
**VICE CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121137**

Date of Receipt

**07 / 31 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARILYN COOPER**

Mailing Address **38820 MARACAIBO CIR**

City **PALM SPRINGS** State **CA** Zip Code **92264**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.121138**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTIN COOPER**

Mailing Address **616 EDGEWATER AVENUE**

City **OCEANSIDE** State **CA** Zip Code **92057-4658**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COOPER CONSULTING, INC.**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121140**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**285.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 318 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARTIN COOPER**

Mailing Address **616 EDGEWATER AVENUE**

City <b>OCEANSIDE</b>	State <b>CA</b>	Zip Code <b>92057-4658</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COOPER CONSULTING, INC.**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121141**

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NORMAN COOPER**

Mailing Address **2015 FM 2673**

City <b>CANYON LAKE</b>	State <b>TX</b>	Zip Code <b>78133</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**REALTY ENGINEERING, INC.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.121143**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NORMAN COOPER**

Mailing Address **2015 FM 2673**

City <b>CANYON LAKE</b>	State <b>TX</b>	Zip Code <b>78133</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**REALTY ENGINEERING, INC.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**800.00**

**Transaction ID : SA17A.121144**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT COOPER**

Mailing Address 2717 PALOS VERDES DRIVE

City	State	Zip Code
PALOS VERDES ESTATES	CA	90274

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BUCKHOLTZ**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121146**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY COORS**

Mailing Address 16126 W 32ND AVE

City	State	Zip Code
GOLDEN	CO	80401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121148**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH COPE**

Mailing Address 1695 TIMACUAN DRIVE

City	State	Zip Code
VIERA	FL	32940

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121150**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 320 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TREVOR COPELAND**

Mailing Address **828 BONNIE BRAE LN.**

City	State	Zip Code
<b>BOLINGBROOK</b>	<b>IL</b>	<b>60440</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BRINKS GILSON & LIONE**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121152**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
<b>07</b>			<b>13</b>			<b>2015</b>			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANNE CORI**

Mailing Address **9715 LITZSINGER ROAD**

City	State	Zip Code
<b>SAINT LOUIS</b>	<b>MO</b>	<b>63124</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.121154**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
<b>08</b>			<b>12</b>			<b>2015</b>			

SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANNE CORI**

Mailing Address **9715 LITZSINGER ROAD**

City	State	Zip Code
<b>SAINT LOUIS</b>	<b>MO</b>	<b>63124</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121154.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
<b>08</b>			<b>12</b>			<b>2015</b>			

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 321 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANNE CORI**

Mailing Address 9715 LITZSINGER ROAD

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121154.1**

Date of Receipt

**08 / 12 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID CORMIA**

Mailing Address 336 MUSTANG STREET

City	State	Zip Code
SAN JOSE	CA	95123

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121156**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DELOR CORNELL**

Mailing Address PO BOX 807

City	State	Zip Code
WOODBURY	NJ	08096

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORNELL & CO

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121158**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGG CORNELL**

Mailing Address 14 STONE HOLW

City	State	Zip Code
GREENVILLE	SC	29605

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121160**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LID CORRAO**

Mailing Address PO BOX 12907

City	State	Zip Code
RENO	NV	89510

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121162**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRITZ CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.121164**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

12300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 323 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**FRITZ CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121165**

Date of Receipt

**08** / **20** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FRITZ CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121166**

Date of Receipt

**08** / **20** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FRITZ CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121167**

Date of Receipt

**08** / **20** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GLEND A CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121169**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLEND A CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121170**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GLEND A CORRIGAN**

Mailing Address PO BOX 5050

City	State	Zip Code
CAREFREE	AZ	85377

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121171**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL A CORRIGAN**

Mailing Address 26980 CRESTWOOD DR

City	State	Zip Code
FRANKLIN	MI	48025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORRIGAN MOVING SYSTEMS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121173**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL A CORRIGAN**

Mailing Address 26980 CRESTWOOD DR

City	State	Zip Code
FRANKLIN	MI	48025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORRIGAN MOVING SYSTEMS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121174**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL A CORRIGAN**

Mailing Address 26980 CRESTWOOD DR

City	State	Zip Code
FRANKLIN	MI	48025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORRIGAN MOVING SYSTEMS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.121175**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL A CORRIGAN**

Mailing Address 26980 CRESTWOOD DR

City	State	Zip Code
FRANKLIN	MI	48025

FEC ID number of contributing federal political committee.

C

Name of Employer  
CORRIGAN MOVING SYSTEMS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.121176**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM CORRIGAN**

Mailing Address 1664 STRASBOURG

City	State	Zip Code
TRAVERSE CITY	MI	49696

FEC ID number of contributing federal political committee.

C

Name of Employer  
BY THE BAY TRANSPORTATION LLC

Occupation  
SMALL BUSINESS OWNER (BY THE BAY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121178**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROLYN J COSGROVE**

Mailing Address 5131 GOLDEN EAGLE LANE

City	State	Zip Code
TUMWATER	WA	98512

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121179**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM R COSGROVE**

Mailing Address 5131 GOLDEN EAGLE LN

City	State	Zip Code
TUMWATER	WA	98512

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121181**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LARRY COSMO**

Mailing Address 10 JOHN MATTHEW RD

City	State	Zip Code
HOPKINTON	MA	01748

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121183**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROB COST**

Mailing Address 483 MAIN

City	State	Zip Code
GLEN ROCK	NJ	07452

FEC ID number of contributing federal political committee.

C

Name of Employer  
TESTING

Occupation  
TEST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-1.00

**Transaction ID : SA17A.26023**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

499.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN COSTANZO**

Mailing Address 20920

City State Zip Code  
ELKHORN NE 68022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.121185**

Date of Receipt

M M / D D / Y Y Y Y  
08 25 2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN COSTELLO**

Mailing Address 427 INDIES DRIVE

City State Zip Code  
VERO BEACH FL 32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121187**

Date of Receipt

M M / D D / Y Y Y Y  
08 14 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN F. COTNER**

Mailing Address 5929 BROADWAY ST

City State Zip Code  
MANSFIELD AR 72944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121189**

Date of Receipt

M M / D D / Y Y Y Y  
07 01 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5450.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICK W COTTER**

Mailing Address **N381 MARIPOSA LANE**

City <b>WISCONSIN DEL</b>	State <b>WI</b>	Zip Code <b>53965</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121191**

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL COTTER**

Mailing Address **N4709 TALL TIMBER CIR**

City <b>MONTELLO</b>	State <b>WI</b>	Zip Code <b>53949</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17A.121192**

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DUANE COTTINGHAM**

Mailing Address **10983 COTTINGHAM ROAD**

City <b>PEOSTA</b>	State <b>IA</b>	Zip Code <b>52068</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121194**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JON B COTTON**

Mailing Address 170 PROVENCAL ROAD

City State Zip Code  
GROSS POINTE MI 48236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MERIDIAN HEALTH PLAN

Occupation  
VP OF FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121196**

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JON B COTTON**

Mailing Address 170 PROVENCAL ROAD

City State Zip Code  
GROSS POINTE MI 48236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MERIDIAN HEALTH PLAN

Occupation  
VP OF FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121196.0**

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LINDSAY COTTON**

Mailing Address 170 PROVENCAL RD

City State Zip Code  
GROSSE POINTE FARMS MI 48236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121196.1**

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SEAN P COTTON**

Mailing Address 33 HENDRIE LANE

City	State	Zip Code
GROSSE POINTE FARMS	MI	48236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CAIDAN MANAGEMENT COMPANY

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121198**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SEAN P COTTON**

Mailing Address 33 HENDRIE LANE

City	State	Zip Code
GROSSE POINTE FARMS	MI	48236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CAIDAN MANAGEMENT COMPANY

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121198.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NANCY COTTON**

Mailing Address 33 HENDRIE LN

City	State	Zip Code
GROSSE POINTE FARMS	MI	48236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121198.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT COULSON**

Mailing Address 427 MISTY MORN LANE

City	State	Zip Code
CEDAR PARK	TX	78613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RESTAURANT DEVELOPERS CORP

Occupation  
CHAIRMAN/FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121200**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT COULSON**

Mailing Address 427 MISTY MORN LANE

City	State	Zip Code
CEDAR PARK	TX	78613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RESTAURANT DEVELOPERS CORP

Occupation  
CHAIRMAN/FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.121201**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT COULSON**

Mailing Address 427 MISTY MORN LANE

City	State	Zip Code
CEDAR PARK	TX	78613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RESTAURANT DEVELOPERS CORP

Occupation  
CHAIRMAN/FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.121202**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERALD COURI**

Mailing Address 1215 SEITZ DRIVE

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121207**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALD COURI**

Mailing Address 1215 SEITZ DRIVE

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121207.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

REATTRIBUTION TO JUDIE COURI

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDITH COURI**

Mailing Address 1215 SEITZ DR

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121207.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

REATTRIBUTION FROM GERALD COURI

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERALD COURI**

Mailing Address 1215 SEITZ DRIVE

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.121204**

Date of Receipt

**07 / 07 / 2015**

REFUNDED ON 12/7/2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDITH COURI**

Mailing Address 1215 SEITZ DR

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2710.00

**Transaction ID : SA17A.26219**

Date of Receipt

**07 / 05 / 2015**

REFUNDED ON 8/21/2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDITH COURI**

Mailing Address 1215 SEITZ DR

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3210.00

**Transaction ID : SA17A.121212**

Date of Receipt

**07 / 16 / 2015**

REFUNDED ON 8/21/2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5910.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**KRISS COURI**

Mailing Address 3517 SEQUOIA CIR

City State Zip Code  
WAUKESHA WI 53188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CASE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121214**

Date of Receipt

M M / D D / Y Y Y Y  
07 08 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KRISS COURI**

Mailing Address 3517 SEQUOIA CIR

City State Zip Code  
WAUKESHA WI 53188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CASE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121215**

Date of Receipt

M M / D D / Y Y Y Y  
07 08 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN COUZENS**

Mailing Address 399 MADISON ST

City State Zip Code  
DENVER CO 80206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE NORTHERN TRUST COMPANY

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121217**

Date of Receipt

M M / D D / Y Y Y Y  
07 28 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5650.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT S COWEN**

Mailing Address 9617 N JUNIPER CIRCLE

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121219**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES COWLES**

Mailing Address 2506 S BOXWOOD LANE  
P

City	State	Zip Code
SPOKANE	WA	99223

FEC ID number of contributing federal political committee.

C

Name of Employer  
INLAND EMPIRE PAPER CO.

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121221**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BOBBY T COX**

Mailing Address 2375 FARM BROOK TRAIL

City	State	Zip Code
OXFORD	MI	48370

FEC ID number of contributing federal political committee.

C

Name of Employer  
ACORN STAMPING, INC.

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121223**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			17			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS R COX**

Mailing Address 12711 RIVER RD

City	State	Zip Code
POTOMAC	MD	20854

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GIBSON DUNN & CRUTCHER**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121225**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWIN L COX**

Mailing Address 2100 MCKINNEY AVENUE, S

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EDWIN COX CO**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121227**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWIN L COX**

Mailing Address 2100 MCKINNEY AVENUE, S

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EDWIN COX CO**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121227.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWIN L COX**

Mailing Address 2100 MCKINNEY AVENUE, S

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EDWIN COX CO**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121227.1**

Date of Receipt

**08 / 14 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA COX**

Mailing Address 4846 N BENTWOOD DR

City	State	Zip Code
SAN ANGELO	TX	76904

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121229**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ABBY COYLE**

Mailing Address 7790 CHERRY WOOD LN

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121231**

Date of Receipt

**06 / 26 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CATHERIN A COYLE**

Mailing Address **3494 SABAKA TRL**

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.121233**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CATHERIN A COYLE**

Mailing Address **3494 SABAKA TRL**

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121234**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JARRELL COYLE**

Mailing Address **1505 MONARCH OAKS**

City	State	Zip Code
HOUSTON,	TX	77055

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121235**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JARRELL COYLE**

Mailing Address 1505 MONARCH OAKS

City	State	Zip Code
HOUSTON,	TX	77055

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121236**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHERIN A COYLE**

Mailing Address 10511 N SUNRISE COURT

City	State	Zip Code
PEORIA	IL	61615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121238**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICK COYLE**

Mailing Address 3494 SABAKA TRL

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COYLECARPETONE

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121240**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

300.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS COYLE**

Mailing Address 7790 CHERRY WOOD LN

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COYLE CARPET

Occupation  
CO GENERAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121242**

Date of Receipt

**06 / 26 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS COYLE**

Mailing Address 7790 CHERRY WOOD LN

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COYLE CARPET

Occupation  
CO GENERAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121243**

Date of Receipt

**06 / 26 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KC CRAICHY**

Mailing Address PO BOX 1038

City	State	Zip Code
TAMPA	FL	33601

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LIVING FUEL, INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121245**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES CRAIG**

Mailing Address 10123 METRONOME DRIVE

City	State	Zip Code
HOUSTON	TX	77080

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BARCLAYS INVESTMENT BANK**

Occupation  
**ASSOCIATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121247**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HUNTER CRAIG**

Mailing Address 2065 DOGWOOD LANE

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HEC CO**

Occupation  
**REAL ESTATE INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121249**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JENNY CRAIG**

Mailing Address PO BOX 675532

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121251**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENNY CRAIG**

Mailing Address PO BOX 675532

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121252**

Date of Receipt

**07** / **28** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JENNY CRAIG**

Mailing Address PO BOX 675532

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121252.0**

Date of Receipt

**07** / **28** / **2015**

SEE REDESIGNATED

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JENNY CRAIG**

Mailing Address PO BOX 675532

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121252.1**

Date of Receipt

**07** / **28** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 344 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVE CRAIG**

Mailing Address 1 OCEANCREST

City	State	Zip Code
NEWPORT COAST	CA	92657

FEC ID number of contributing federal political committee.

C

Name of Employer  
CRAIG REALTY GR

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121254**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STUART M CRAIG**

Mailing Address 2065 DOGWOOD LANE

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121256**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT CRAMPTON**

Mailing Address 3003 HIGHWAY 95

City	State	Zip Code
BULLHEAD CITY	AZ	86442

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PODIATRIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121258**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALPO F CRANE**

Mailing Address 8359 PROVIDENCE RD

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121260**

Date of Receipt

**08 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALPO F CRANE**

Mailing Address 8359 PROVIDENCE RD

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121261**

Date of Receipt

**08 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARJORIE K CRANE**

Mailing Address 8359 PROVIDENCE RD

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121263**

Date of Receipt

**08 / 07 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL CRANNY**

Mailing Address **652 E SAWGRASS TRAIL**

City	State	Zip Code
DAKOTA DUNES	SD	57049

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121265**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN CRANSTON**

Mailing Address **134 SAVANNA ESTATES DRIVE**

City	State	Zip Code
CANTON	GA	30115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIMEDX**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121267**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN CRAPUCHETTES**

Mailing Address **4870 S TOWNSEND PLACE**

City	State	Zip Code
BOISE	ID	83709

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WASK ENGINEERING, INC.**

Occupation  
**MECHANICAL ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.121268**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1600.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN A CRAWFORD**

Mailing Address **2434 CULLEYWOOD RD**

City	State	Zip Code
JACKSON	MS	39211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121270**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOY I CRAWFORD**

Mailing Address **10790 CRAWFORD LN**

City	State	Zip Code
NEW CONCORD	OH	43762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121271**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

**350.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOY I CRAWFORD**

Mailing Address **10790 CRAWFORD LN**

City	State	Zip Code
NEW CONCORD	OH	43762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**580.00**

**Transaction ID : SA17A.121272**

Date of Receipt

**09 / 25 / 2015**

Amount of Each Receipt this Period

**80.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**680.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 348 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WADE CRAWFORD**

Mailing Address 201 MATHEW ST

City	State	Zip Code
PORTERVILLE	CA	93257

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

217.00

**Transaction ID : SA17A.121273**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

31.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAX CREAMER**

Mailing Address 692 ADOBE DR

City	State	Zip Code
DANVILLE	CA	94526

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121275**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THERESA CRIBBIN**

Mailing Address

City	State	Zip Code
STAMFORD	CT	

FEC ID number of contributing federal political committee.

C

Name of Employer  
Ivey, Barnum, & O'Mara, LLC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.121277**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

281.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHARON CRIMMEL**

Mailing Address 6955 CARLISLE COURT, AP

City	State	Zip Code
NAPLES	FL	34109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

355.00

**Transaction ID : SA17A.121279**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

355.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DALE A CRITTENDEN**

Mailing Address PO BOX 517

City	State	Zip Code
FAIRHOPE	AL	36533

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

263.00

**Transaction ID : SA17A.121280**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES CROCKER**

Mailing Address 1 POST ST

City	State	Zip Code
SAN FRANCISCO	CA	94104

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121282**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3205.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES CROCKER**

Mailing Address 1 POST ST

City State Zip Code  
SAN FRANCISCO CA 94104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121283**

Date of Receipt

M M / D D / Y Y Y Y  
07 06 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES CROCKER**

Mailing Address 1 POST ST

City State Zip Code  
SAN FRANCISCO CA 94104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121283.0**

Date of Receipt

M M / D D / Y Y Y Y  
07 06 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LUCINDA CROCKER**

Mailing Address 1 POST ST

City State Zip Code  
SAN FRANCISCO CA 94104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121283.1**

Date of Receipt

M M / D D / Y Y Y Y  
07 06 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARSHALL CROMER**

Mailing Address 4701 OAKPORT ST

City	State	Zip Code
OAKLAND	CA	94601

FEC ID number of contributing federal political committee.

C

Name of Employer  
CROMER MATERIAL HANDLING

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121285**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARSHALL CROMER**

Mailing Address 4701 OAKPORT ST

City	State	Zip Code
OAKLAND	CA	94601

FEC ID number of contributing federal political committee.

C

Name of Employer  
CROMER MATERIAL HANDLING

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121286**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY AND DIANE CROOK**

Mailing Address N75 W17496 WILSON DRIVE

City	State	Zip Code
MENOMONEE FALLS	WI	53051

FEC ID number of contributing federal political committee.

C

Name of Employer  
BLACKHAWK INDUSTRIAL

Occupation  
CUSTOMER SERVICE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121288**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEVON G CROSS**

Mailing Address **875 - 5TH AVENUE, APT 1**

City	State	Zip Code
NEW YORK	NY	10065

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**POLILY FORUM**

Occupation  
**NONPROFIT DIR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121290**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROGER CROSS**

Mailing Address **PO BOX 173**

City	State	Zip Code
WAUPACA	WI	54981

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121292**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN CROSSLAND**

Mailing Address **2102 FORGE RD**

City	State	Zip Code
SANTA BARBARA	CA	93108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121294**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**OTIS CROWDER**

Mailing Address 1103 BELLEGROVE PLACE

City	State	Zip Code
CHARLOTTE	NC	26270

FEC ID number of contributing federal political committee.

C

Name of Employer  
CROWDER CONSTRUCTION

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121296**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 03 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK CROWLEY**

Mailing Address 2008 VIZVAYA WALK

City	State	Zip Code
SACRAMENTO	CA	95818

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121298**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS CROYLE**

Mailing Address 26726 MIDLAND ROAD

City	State	Zip Code
BAY VILLAGE	OH	44140

FEC ID number of contributing federal political committee.

C

Name of Employer  
NA

Occupation  
NA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121300**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 22 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 354 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID W CROYS DALE**

Mailing Address 10550 N CEDARBURG RD

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MICHAEL BEST AND FRIEDRICH LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.121302**

Date of Receipt

**07 / 06 / 2015**

Amount of Each Receipt this Period

1350.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAURA CROYS DALE**

Mailing Address 10550 N CEDARBURG RD

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.121304**

Date of Receipt

**07 / 06 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

1350.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LESLIE A CROZIER**

Mailing Address 3535 GILLESPIE STREET #

City	State	Zip Code
DALLAS	TX	75219

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121306**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JESSE CRUZ**

Mailing Address 1510 CRABTREE LANE

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121308**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD CUCCO**

Mailing Address 4509 PRIME PKWY

City	State	Zip Code
MCHENRY	IL	60050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROSS IMAGING, INC.

Occupation  
MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121310**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD CUCCO**

Mailing Address 4509 PRIME PKWY

City	State	Zip Code
MCHENRY	IL	60050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROSS IMAGING, INC.

Occupation  
MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121310.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARTHA CUCCO**

Mailing Address 4509 PRIME PARKWAY

City	State	Zip Code
MCHENRY	IL	60050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121310.1**

Date of Receipt

**07 / 13 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN J CUENE**

Mailing Address 4500 OAK RIDGE CIRCLE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121314**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREW CULBERTSON**

Mailing Address 700 BRUSH CREEK ROAD

City	State	Zip Code
MANCHESTER	OH	45144

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MACA PLASTICS

Occupation  
MANUFACTURING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121316**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRAD CULBERTSON**

Mailing Address 3437 PALO VISTA DRIVE

City	State	Zip Code
RANCHO PALOS VERDES	CA	90275

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121318**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRAD CULBERTSON**

Mailing Address PALO VISTA DRIVE

City	State	Zip Code
RANCHO PALOS VERDES	CA	92015

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121320**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DARLENE CULLEN**

Mailing Address 12 BAMBOO TER

City	State	Zip Code
KEY WEST	FL	33040

FEC ID number of contributing federal political committee.

C

Name of Employer  
KEY WEST INSURANCE

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121321**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LAURI CULLEN**

Mailing Address **4450 INDIAN TRAIL**

City <b>GREEN BAY</b>	State <b>WI</b>	Zip Code <b>54313</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121323**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS CULLOTON**

Mailing Address **200 E. ILLINOIS 2405**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60611</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CULLOTON STRATEGIES**

Occupation  
**PUBLIC RELATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121325**

Date of Receipt

M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REBEKAH CULOTTA**

Mailing Address **1613 VONDRON RD.**

City <b>MADISON</b>	State <b>WI</b>	Zip Code <b>53716</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOUSEWIFE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121327**

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENDAN CUMMINGS**

Mailing Address 3503 URBAN WOODS TRAIL

City	State	Zip Code
HOUSTON	TX	77008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121329**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM CUMMINGS**

Mailing Address 6732 CEDAR STREET

City	State	Zip Code
WAUWATOSA	WI	53213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
REINHART, BOERNER, VAN DUEREN

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121331**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDITH C CUNNANE**

Mailing Address 60 SEAGATE DR

City	State	Zip Code
NAPLES	FL	34103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121333**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 360 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HILARY H CUNNIFF**

Mailing Address 12 EGLANTINE AVE

City	State	Zip Code
PENNINGTON	NJ	08534

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121335**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HILARY H CUNNIFF**

Mailing Address 12 EGLANTINE AVE

City	State	Zip Code
PENNINGTON	NJ	08534

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.121336**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY M CUNNINGHAM**

Mailing Address 1602 TIMBERLAKE MANO

City	State	Zip Code
CHESTERFIELD	MO	63017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121338**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY M CUNNINGHAM**

Mailing Address 1602 TIMBERLAKE MANO

City	State	Zip Code
CHESTERFIELD	MO	63017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121339**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANE CUNNINGHAM**

Mailing Address 1602 TIMBERLAKE PARK

City	State	Zip Code
CHESTERFIELD	MO	63017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121341**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RALPH CUNNINGHAM**

Mailing Address 5128 TANGLE LN

City	State	Zip Code
HOUSTON	TX	77056

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENTERPRISE PRODUCTS COMPANY**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121343**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN CUNNINGHAM**

Mailing Address 15 TRANQUILITY RD

City	State	Zip Code
MONETA	VA	24121

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BELLA LUNA ASSET MANAGEMENT**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121345**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH M CUNNINGHAM JR**

Mailing Address 865 CENTRAL AVENUE N-505

City	State	Zip Code
NEEDHAM	MA	02492

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NEW ENGLAND AUTO DELIVERY INC**

Occupation  
**DRIVER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121347**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS CURATOLO**

Mailing Address 935 BURLINGTON AVE.

City	State	Zip Code
DOWNERS GROVE	IL	60515

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMETOWN AMERICA**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121349**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DON S CURRIE**

Mailing Address 1150 HARTRICK CANYON

City	State	Zip Code
TEMPLE	TX	76502

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CURRY RENTALS, LLC**

Occupation  
**MM**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121351**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VIRGINIA CURRY**

Mailing Address 2113 MONROE ST

City	State	Zip Code
NEW HOLSTEIN	WI	53061

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121353**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VIRGINIA CURRY**

Mailing Address 2113 MONROE ST

City	State	Zip Code
NEW HOLSTEIN	WI	53061

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121354**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM C CURRY**

Mailing Address 2113 MONROE ST

City	State	Zip Code
NEW HOLSTEIN	WI	53061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CJ MEISELWITZ

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121356**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VERLIN CUSTER**

Mailing Address 1744 E. 800 N.

City	State	Zip Code
RUSHVILLE	IN	46173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121358**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE CUTRIN**

Mailing Address 100 PARCOAL RD

City	State	Zip Code
WEBSTER SPRIN	WV	26288

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121360**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

500.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY D CYGANIAK**

Mailing Address 9397 N FAIRWAY CIR

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121362**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD CZUKER**

Mailing Address 121 SOUTH BEVERLY DRIVE

City	State	Zip Code
BEVERLY HILLS	CA	90212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121364**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

REATTRIBUTION REQUESTED

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELISSA CZUKER**

Mailing Address 121 SOUTH BEVERLY DRIVE

City	State	Zip Code
BEVERLY HILLS	CA	90212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.121364.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD CZUKER**

Mailing Address 121 SOUTH BEVERLY DRIVE

City	State	Zip Code
BEVERLY HILLS	CA	90212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.121364.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES D'AMBRISI**

Mailing Address 3605 CHESTERWOOD DR

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FABRIFAST

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121366**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID D**

Mailing Address 343 S ELM STREET

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ABRA AUTO BODY

Occupation  
PARTS MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121368**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN DAAS**

Mailing Address 3100 EDWARD ST. NE

City	State	Zip Code
ST. ANTHONY	MN	55418

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GTN

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121370**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GORDON DABBS**

Mailing Address 4426 N 100TH ST

City	State	Zip Code
OMAHA	NE	68134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UNITED STATES POSTAL SERVICE

Occupation  
LETTER CARRIER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121372**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICK DABRY**

Mailing Address 3115 OVERHILL ROAD

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121374**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

750.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES DACEY**

Mailing Address 120 INDEPENDENCE LN

City	State	Zip Code
CHALFONT	PA	18914

FEC ID number of contributing federal political committee.

C

Name of Employer  
DOLI CONSTRUCTION COMPANY

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121376**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANETTE DACEY**

Mailing Address 405 APPIAN WAY

City	State	Zip Code
DOYLESTOWN	PA	18901

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121378**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANNE DAFFRON**

Mailing Address 426 ROBALO RD

City	State	Zip Code
GREENSBORO	NC	27406

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121379**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANTHONY DAGOSTINO**

Mailing Address 1350 TAMIAMI TRAIL NORTH  
SUITE 201

City State Zip Code  
NAPLES FL 34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121380**

Date of Receipt

M M / D D / Y Y Y Y  
07 30 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANTHONY DAGOSTINO**

Mailing Address 1350 TAMIAMI TRAIL NORTH  
SUITE 201

City State Zip Code  
NAPLES FL 34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121381**

Date of Receipt

M M / D D / Y Y Y Y  
09 10 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALYCE G DAHLIN**

Mailing Address 2670 GOOD SHEPHERD LN

City State Zip Code  
GREEN BAY WI 54313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121383**

Date of Receipt

M M / D D / Y Y Y Y  
08 07 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BERNARD E DAHLIN**

Mailing Address 2670 GOOD SHEPHERD LANE

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NICHOLS PAPER PRODUCTS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121385**

Date of Receipt

**08 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BERNARD E DAHLIN**

Mailing Address 2670 GOOD SHEPHERD LANE

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NICHOLS PAPER PRODUCTS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121386**

Date of Receipt

**08 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERNARD A. (CHIP) DAHLIN III**

Mailing Address 1954 E. TELEMAR CIRCLE

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NICHOLS PAPER PRODUCTS COMPANY, INC.**

Occupation  
**VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121388**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRUCE DALLAS**

Mailing Address 1600 EL CAMINO REAL

City	State	Zip Code
MENLO PARK	CA	94025

FEC ID number of contributing federal political committee.

C

Name of Employer  
DAVIS POLK & WARDWELL

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121390**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRUCE DALLAS**

Mailing Address 1600 EL CAMINO REAL

City	State	Zip Code
MENLO PARK	CA	94025

FEC ID number of contributing federal political committee.

C

Name of Employer  
DAVIS POLK & WARDWELL

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121391**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN DALMAN**

Mailing Address 8308 FOREST GLENN

City	State	Zip Code
N RICHLAND HILLS	TX	76182

FEC ID number of contributing federal political committee.

C

Name of Employer  
TRANSPORTATION TECHNOLOGY  
SERVICES

Occupation  
MECHANICAL ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121393**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****PAULNE A DALTON**

Mailing Address PO BOX 2406

City

BONITA SPRING

State

FL

Zip Code

34133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121395**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****PAULINE A DALTON**

Mailing Address PO BOX 2406

City

BONITA SPRING

State

FL

Zip Code

34133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121397**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****MARIPAT DALUM**

Mailing Address 31917 APPLE LN

City

HARTLAND

State

WI

Zip Code

53029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128714**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2015			

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)

**THOMAS DALUM**

Mailing Address 9235 GULF SHORE DRIVE

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121399**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

**THOMAS DALUM**

Mailing Address 9235 GULF SHORE DRIVE

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128713**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)

**THOMAS DALY**

Mailing Address 15040 REDMOND LOOP

City	State	Zip Code
RENO	NV	89511

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HSCG

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121401**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5650.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**HELEN DALZELL**

Mailing Address **115 SAVAGE LOOP**

City	State	Zip Code
CANON CITY	CO	81212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**503.00**

**Transaction ID : SA17A.121403**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

**503.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN DAMERON**

Mailing Address **4261 COUNTRY CLUB DR.**

City	State	Zip Code
LONG BEACH	CA	90807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DAMERON ALLOY FOUNDRIES**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121405**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LINDA F DAMIANO**

Mailing Address **4425 N SAWYER RD**

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121407**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3703.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DON DANCER**

Mailing Address 5409 EASTERN SHORES DRIVE

City	State	Zip Code
GREENSBORO	NC	27455

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121409**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LUCY DANCER**

Mailing Address 5409 EASTERN SHORES DRIVE

City	State	Zip Code
GREENSBORO	NC	27455

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121411**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS DANCO**

Mailing Address 11150 SANTA MONICA B

City	State	Zip Code
LOS ANGELES	CA	90025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TBG DANCO, INC.

Occupation  
PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.121413**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

7900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 376 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES DANIEL**

Mailing Address 3036 CHEROKEE ROAD

City	State	Zip Code
MT. BROOK	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121415**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN DANIEL**

Mailing Address OP BOX. 8992

City	State	Zip Code
GRAY	TN	37615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121417**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN DANIEL**

Mailing Address OP BOX. 8992

City	State	Zip Code
GRAY	TN	37615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121418**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN DANIEL**

Mailing Address **OP BOX. 8992**

City	State	Zip Code
GRAY	TN	37615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17A.121419**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIE DANIELS**

Mailing Address **2191 KYLE ROAD**

City	State	Zip Code
BARTLESVILLE	OK	74006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121421**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JULIE DANIELS**

Mailing Address **2191 KYLE ROAD**

City	State	Zip Code
BARTLESVILLE	OK	74006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121422**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			11			2015			

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID A DANZ**

Mailing Address **377 FROST DRIVE**

City <b>WILLIAMS BAY</b>	State <b>WI</b>	Zip Code <b>53191</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DANZ LAW OFFICE**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121424**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETER DARCO**

Mailing Address **43 BUTTERWORTH AVENUE**

City <b>STATEN ISLAND</b>	State <b>NY</b>	Zip Code <b>10301</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETAIL**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.121426**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**220.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD DARENDINGE**

Mailing Address **27270 LILLEGARD CT**

City <b>TRACY</b>	State <b>CA</b>	Zip Code <b>95304</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JUNIPER NETWORKS**

Occupation  
**VP OPERATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121428**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**970.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM DARLING**

Mailing Address 27 SCHOOL STREET, STE 200

City	State	Zip Code
BOSTON	MA	02108

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121430**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM DARLING**

Mailing Address 27 SCHOOL STREET, STE 200

City	State	Zip Code
BOSTON	MA	02108

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.121431**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOYCE K DARNBROOK**

Mailing Address 16871 FAIRFIELD STREET

City	State	Zip Code
LIVONIA	MI	48154

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121432**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RUSS DARROW**

Mailing Address **4664 CEDAR PARK DR**

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RUSS DARROW GROUP**

Occupation  
**CHAIRMAN/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121434**

Date of Receipt

**06 / 29 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RUSS DARROW**

Mailing Address **4664 CEDAR PARK DR**

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RUSS DARROW GROUP**

Occupation  
**CHAIRMAN/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121435**

Date of Receipt

**06 / 29 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUSAN J DARROW**

Mailing Address **4664 CEDAR PARK DR**

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121437**

Date of Receipt

**06 / 29 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRANK DAUGHERTY**

Mailing Address 1111 S 112TH PLAZA

City	State	Zip Code
OMAHA	NE	68144

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENTREPRENEUR**

Occupation  
**ENTREPRENEUR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.121439**

Date of Receipt

**07 / 27 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANK DAUGHERTY**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2300.00

**Transaction ID : SA17A.128675**

Date of Receipt

**07 / 27 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK DAUGHERTY**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.128676**

Date of Receipt

**07 / 27 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT DAUM**

Mailing Address 3306 S STATE ROAD 267

City	State	Zip Code
PLAINFIELD	IN	46168

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER/TRUCKING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121441**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE M DAUPHINE**

Mailing Address 13640 OVERLAND PASS

City	State	Zip Code
POWAY	CA	92064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DOCUMENT SYSTEM**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121443**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOE DAUTERMANN**

Mailing Address 1145 RIVERBEND DR

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HARTFORD**

Occupation  
**MAYOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121445**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTIE DAVANZO**

Mailing Address 708 JAMES DOAK PKWY

City	State	Zip Code
GREENSBORO	NC	27455

FEC ID number of contributing federal political committee.

C

Name of Employer  
PEDIATRIX MEDICAL GROUP OF NC

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121447**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SVEN DAVIES**

Mailing Address 816 N. BRAINARD ST.

City	State	Zip Code
NAPERVILLE	IL	60563

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121449**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREW DAVIS**

Mailing Address 2525 S SHORE DRIVE, 7C

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing federal political committee.

C

Name of Employer  
METROPOLITAN MILWAUKEE ASSOC OF  
COMMER

Occupation  
LEGISLATOR DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121450**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVE DAVIS**

Mailing Address **W191S332 SHORE LANE**

City <b>MUSKEGO</b>	State <b>WI</b>	Zip Code <b>53150</b>
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FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SECURANT BANK & TRUST**

Occupation  
**BANKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121452**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD W DAVIS**

Mailing Address **501 VIA CASITAS NO. 1113**

City <b>GREENBRAE</b>	State <b>CA</b>	Zip Code <b>94904</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121454**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DWIGHT E DAVIS**

Mailing Address **P.O. BOX 647**

City <b>SISTER BAY</b>	State <b>WI</b>	Zip Code <b>54234</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GREENHECK CORP**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121456**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY DAVIS**

Mailing Address **6129 S. FLAMINGO CT.**

City	State	Zip Code
CENTENNIAL	CO	80121

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**COLUMBIA BENEFITS, LLC**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121458**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J. KENNERLY DAVIS**

Mailing Address **327 OAK LANE**

City	State	Zip Code
RICHMOND	VA	23226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HUNTON & WILLIAMS**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121460**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOAN DAVIS**

Mailing Address **1637 WILLOW ST**

City	State	Zip Code
NORRISTOWN	PA	19401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STV GROUP**

Occupation  
**ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.121461**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY DAVIS**

Mailing Address 4023 FAIRLAKES DR

City	State	Zip Code
DALLAS	TX	75228

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.121463**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

375.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARTIN K DAVIS**

Mailing Address 401 SPRESSER STREET

City	State	Zip Code
TAYLORVILLE	IL	62568

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121465**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MONTY DAVIS**

Mailing Address 19827 CYPRESS CHURCH RD

City	State	Zip Code
CYPRESS	TX	77433

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORE LAB LP

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121467**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3325.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MONTY DAVIS**

Mailing Address 19827 CYPRESS CHURCH RD

City	State	Zip Code
CYPRESS	TX	77433

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORE LAB LP

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121468**

Date of Receipt

**07 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MONTY DAVIS**

Mailing Address 19827 CYPRESS CHURCH RD

City	State	Zip Code
CYPRESS	TX	77433

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORE LAB LP

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121468.0**

Date of Receipt

**07 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BETTY DAVIS**

Mailing Address 19827 CYPRESS CHURCH RO

City	State	Zip Code
CYPRESS	TX	77433

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121468.1**

Date of Receipt

**07 / 20 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEBBIE DAWSON**

Mailing Address 505 CROWN VIEW DRIVE

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

C

Name of Employer  
MRS.

Occupation  
0

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121470**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HARLEY DAWSON**

Mailing Address 11251 W GARROW RD

City	State	Zip Code
MIDDLEVILLE	MI	49333

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121472**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALLAS DAY**

Mailing Address 3188 AIRWAY AVENUE

City	State	Zip Code
COSTA MERA	CA	92626

FEC ID number of contributing federal political committee.

C

Name of Employer  
DAY CONSTRUCTION

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.121474**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES DAY**

Mailing Address 176 WOODLAND DR

City	State	Zip Code
VISTA	CA	92083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121476**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARVIN DAY**

Mailing Address 604 S. WALNUT STREET

City	State	Zip Code
MOUNT PLEASANT	IA	52641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RESTAURANT OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121478**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NATHANIE B DAY**

Mailing Address 1 HILLSIDE DR

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121480**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS DAYSPRING**

Mailing Address 10701 SHEPPARDS WAY DRIVE

City	State	Zip Code
GLEN ALLEN	VA	23060-1940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HEALTH DIAGNOSTIC LABORATORY

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.00

**Transaction ID : SA17A.121481**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

53.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEBBIE DEAN**

Mailing Address 6430 VICKERY CREEK ROAD

City	State	Zip Code
CUMMING	GA	30040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MIMEDX

Occupation  
EXEC VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121483**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK DEAN**

Mailing Address 2001 FLORENCE BOULEVARD

City	State	Zip Code
FLORENCE	AL	35630

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STATE FARMERS

Occupation  
AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.121485**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

375.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3128.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE H DEAN**

Mailing Address 261 NAUTICA DR

City	State	Zip Code
PORT WASHINGT	WI	53074

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PORT-SAUKVILLE SCHOOLS

Occupation  
PHYSICAL THERAPIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121487**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH DEAN**

Mailing Address 261 NAUTICA DR

City	State	Zip Code
PORT WASHINGT	WI	53074

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
US SENATE

Occupation  
AID

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121489**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH DEAN**

Mailing Address 261 NAUTICA DR

City	State	Zip Code
PORT WASHINGT	WI	53074

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
US SENATE

Occupation  
AID

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121490**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH DEANE**

Mailing Address 610 W. LAS OLAS BLVD

City	State	Zip Code
FORT LAUDERDALE	FL	33312

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE PACIFIC FINANCIAL GROUP, INC.**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121492**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY DEARNLEY**

Mailing Address 1268 TOWNBROOK XING

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121494**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL DEASY**

Mailing Address 13316 S SHAWDEE RD S

City	State	Zip Code
HUNTSVILLE	AL	35803

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121495**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1550.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL DEASY**

Mailing Address 13316 S SHAWDEE RD S

City	State	Zip Code
HUNTSVILLE	AL	35803

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.121496**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			08			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VICTORIA DEBENEDETT**

Mailing Address P.O. BOX 920

City	State	Zip Code
KENWOOD	CA	95452

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121498**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			24			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VICTORIA DEBENEDETT**

Mailing Address P.O. BOX 920

City	State	Zip Code
KENWOOD	CA	95452

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121499**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			14			2015			

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD DEBOER**

Mailing Address 5145 NORTH RD

City	State	Zip Code
WISCONSIN RAP	WI	54495

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121501**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH DECARO**

Mailing Address 2779 WEST FONTAINEBLEAU DRIVE

City	State	Zip Code
ATLANTA	GA	30360

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121503**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL L DECKER**

Mailing Address 325 PARKVIEW CT

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

C

Name of Employer  
WAUKESHA COUNTY BOARD OF SUP

Occupation  
COUNTY BOARD CHAIR DISTR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121505**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANNA DEELEY**

Mailing Address 2373 AZEVEDO PKWY

City	State	Zip Code
SAN JOSE	CA	95125

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
THE WILLIAM G. IRWIN CHARITY FOUNDATION	GRANTS ADMINISTRATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121506**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.121512**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121512.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

REATTRIBUTION TO AUGUSTIN DEFEO

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AUGUSTIN DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121512.1**

Date of Receipt

**09 / 03 / 2015**

REATTRIBUTION FROM BARBARA DEFEO; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AUGUSTIN DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121512.2**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AUGUSTIN DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121512.3**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121512.4**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA DEFEO**

Mailing Address 30 WEST VIEW DRIVE

City	State	Zip Code
OYSTER BAY	NY	11771

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121512.5**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MATTHEW J DEIBERT**

Mailing Address 482 LONGACRE DR

City	State	Zip Code
CHERRYVILLE	PA	18035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121517**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN M DEJNA**

Mailing Address 4984 SOUTH 65TH STREET

City	State	Zip Code
GREENFIELD	WI	53220

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121519**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONIJ0 DEJONGE**

Mailing Address 1149 EVELYN ST NE

City	State	Zip Code
GRAND RAPIDS	MI	49505

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GRAND VALLEY STATE UNIVERSITY

Occupation  
PROFESSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121521**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELOISE DEJORIA**

Mailing Address 1888 CENTURY PARK E STE

City	State	Zip Code
CENTURY CITY	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ELOISE DEJORIA ACTIVEWEAR

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121523**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN PAU DEJORIA**

Mailing Address **1888 CENTURY PARK E STE**

City	State	Zip Code
CENTURY CITY	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN PAUL MITCHELL SYSTEMS**

Occupation  
**CHAIRMAN & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5500.00**

**Transaction ID : SA17A.121525**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PAU DEJORIA**

Mailing Address **1888 CENTURY PARK E STE**

City	State	Zip Code
CENTURY CITY	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN PAUL MITCHELL SYSTEMS**

Occupation  
**CHAIRMAN & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2800.00**

**Transaction ID : SA17A.121526**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN PAU DEJORIA**

Mailing Address **1888 CENTURY PARK E STE**

City	State	Zip Code
CENTURY CITY	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN PAUL MITCHELL SYSTEMS**

Occupation  
**CHAIRMAN & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121527**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

**-100.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN PAU DEJORIA**

Mailing Address **1888 CENTURY PARK E STE**

City	State	Zip Code
CENTURY CITY	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN PAUL MITCHELL SYSTEMS**

Occupation  
**CHAIRMAN & CEO**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2800.00**

**Transaction ID : SA17A.121528**

Date of Receipt

**07 / 23 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

**100.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARNOLD D DELBRIDGE**

Mailing Address **41 RIVER RIDGE ROAD**

City	State	Zip Code
CEDAR FALLS	IA	50613

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121530**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSE DELGADO**

Mailing Address **12900 W NORTH AVE**

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121532**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSE DELGADO**

Mailing Address 12900 W NORTH AVE

City State Zip Code  
BROOKFIELD WI 53005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.121533**

Date of Receipt

M M / D D / Y Y Y Y  
07 14 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANDREW DEL GIUDICE**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.121535**

Date of Receipt

M M / D D / Y Y Y Y  
09 25 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN DELLERA**

Mailing Address 619 AHAKEA STEET

City State Zip Code  
HONOLULU HI 96816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121537**

Date of Receipt

M M / D D / Y Y Y Y  
06 23 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1650.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ARMAND C DELLOVADE**

Mailing Address 108 CAVASINA DR

City	State	Zip Code
CANONSBURG	PA	15317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
A.C. DELLOVADE

Occupation  
FOUNDER/PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121539**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD DELMATER**

Mailing Address 22 TAVISTOCK DRIVE

City	State	Zip Code
BEDFORD	NH	03110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121540**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARY DELOZIER**

Mailing Address 4010 RILEY STREET  
H

City	State	Zip Code
HOUSTON	TX	00000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121542**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3100.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PHIL DELOZIER**

Mailing Address 4010 RILEY STREET  
H

City State Zip Code  
HOUSTON TX 77005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ENERVEST, LTD

Occupation  
BUSINESSMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121544**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAKAN DELRAHIM**

Mailing Address 2049 CENTURY PARK EAST

City State Zip Code  
LOS ANGELES CA 90067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brownstein Hyatt Farber Schreck

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121546**

Date of Receipt

M M / D D / Y Y Y Y  
07 30 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAKAN DELRAHIM**

Mailing Address 2049 CENTURY PARK EAST

City State Zip Code  
LOS ANGELES CA 90067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brownstein Hyatt Farber Schreck

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121547**

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MAKAN DELRAHIM**

Mailing Address 2049 CENTURY PARK EAST

City	State	Zip Code
LOS ANGELES	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Brownstein Hyatt Farber Schreck

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121547.0**

Date of Receipt

**08 / 04 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAKAN DELRAHIM**

Mailing Address 2049 CENTURY PARK EAST

City	State	Zip Code
LOS ANGELES	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Brownstein Hyatt Farber Schreck

Occupation  
ATTORNEY

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121547.1**

Date of Receipt

**08 / 04 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEL DEMAREE**

Mailing Address 5511 FOUR MILE DR.

City	State	Zip Code
KOKOMO	IN	46901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121548**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

500.00

Total This Period (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEL DEMAREE**

Mailing Address 5511 FOUR MILE DR.

City	State	Zip Code
KOKOMO	IN	46901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

**Transaction ID : SA17A.121549**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN DENEVAN**

Mailing Address 8605 W 127TH PL

City	State	Zip Code
OVERLAND PARK	KS	66213

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121551**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PASQUALE DEON**

Mailing Address 526 OXFORD VALLEY RD

City	State	Zip Code
FAIRLESS HILLS	PA	19030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121553**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK DEPPISCH**

Mailing Address **N74W15969 STONEWOOD**

City	State	Zip Code
MENOMONEE FAL	WI	53051

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SATELL, JOHNSON, APPEL & CO. S.C.**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121555**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS DERBY**

Mailing Address **106 COUNTRY CLIB RD**

City	State	Zip Code
BELLPORT	NY	11713

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EMERALD ISLAND SUPPLY CO**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121556**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**COLLEEN DESANTIS**

Mailing Address **4552 HIGH ROCK TER**

City	State	Zip Code
MARIETTA	GA	30066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIMEDX GROUP**

Occupation  
**DIRECTOR OF REIMBURS.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121558**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARLENE DESIMONE**

Mailing Address 3154 CHIPPING WOOD COURT

City	State	Zip Code
ALPHARETTA	GA	30004

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIMEDX

Occupation  
MARKETING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121560**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIYOUNG DESOMBRE**

Mailing Address 125 BROAD ST

City	State	Zip Code
NEW YORK	NY	10004

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121562**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIMOTHY J DEVANNEY**

Mailing Address 70 PORTER ST

City	State	Zip Code
MANCHESTER	CT	06040

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121564**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 28 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EMMETT DEVEREUX**

Mailing Address PO BOX 1607

City  
**FLORENCE**

State Zip Code  
**OR 97439**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**245.00**

**Transaction ID : SA17A.121565**

Date of Receipt

**08 / 26 / 2015**

Amount of Each Receipt this Period

**115.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARCIA DEVLIN**

Mailing Address 125 E CUTTRISS ST

City  
**PARK RIDGE**

State Zip Code  
**IL 60068**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121567**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAN DEVRIES**

Mailing Address 15370 WHISTLING LANE

City  
**CARMEL**

State Zip Code  
**IN 46033**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121569**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3065.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 409 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL DEWEY**

Mailing Address 39 GRASSLAND WAY

City	State	Zip Code
WESTERLY	RI	02891

FEC ID number of contributing federal political committee.

C

Name of Employer  
DEWEY

Occupation  
VIDEO PRODUCER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121571**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK DIAZ**

Mailing Address 3050 DARIEN PARK DRIVE

City	State	Zip Code
ROSWELL	GA	30076

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIMEDX

Occupation  
SALES OPERATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121573**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD F DICKERSON**

Mailing Address 226 4TH ST

City	State	Zip Code
DEL MAR	CA	92014

FEC ID number of contributing federal political committee.

C

Name of Employer  
DONALD F. DICKERSON ASSOCIAT

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121575**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM DICKEY**

Mailing Address 2317 SUL ROSS

City State Zip Code  
HOUSTON TX 77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121577**

Date of Receipt

M M / D D / Y Y Y Y  
07 21 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MICHELLE DICKMAN**

Mailing Address 1324 N LIBERTY LAKE  
2

City State Zip Code  
LIBERTY LAKE WA 99019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121578**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ANN DICKSON**

Mailing Address 117 N BUESCHING ROAD

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.121580**

Date of Receipt

M M / D D / Y Y Y Y  
09 11 2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

970.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD DICKSON**

Mailing Address 1278 MAIN ST P.O. BOX 253

City	State	Zip Code
MT DESERT	ME	04660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121582**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANK H DI CRISTIN**

Mailing Address 4505 GARMON RD NW

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DICRISTINA INTERNATIONAL COR

Occupation  
AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121584**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA C DIEHL**

Mailing Address 13210 OAK RIDGE TRAIL,

City	State	Zip Code
PALOS HEIGHTS	IL	60463

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.121585**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

825.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM DIERCKSEN**

Mailing Address 1239 CAMBRIA BND

City	State	Zip Code
KISSIMMEE	FL	34759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121587**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM DIERCKSEN**

Mailing Address 1239 CAMBRIA BND

City	State	Zip Code
KISSIMMEE	FL	34759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.121588**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM DIERCKSEN**

Mailing Address 1239 CAMBRIA BND

City	State	Zip Code
KISSIMMEE	FL	34759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.121589**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 413 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LYNELLE DIESTLER**

Mailing Address 699 THORNBERRY CREEK DRI

City	State	Zip Code
HOBART	WI	54155

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121591**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOYCE DILL**

Mailing Address 3725 W CENTER ST

City	State	Zip Code
CINCINNATI	OH	45227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121592**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOYCE DILL**

Mailing Address 3725 W CENTER ST

City	State	Zip Code
CINCINNATI	OH	45227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121593**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOYCE DILL**

Mailing Address 3725 W CENTER ST

City	State	Zip Code
CINCINNATI	OH	45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.121594**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAX M DILLARD**

Mailing Address 3408 SOUTHWESTERN BL

City	State	Zip Code
DALLAS	TX	75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DILLARD ANDERSON GROUP

Occupation  
FOUNDER AND MANAGING DIR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.121596**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES DILLER**

Mailing Address 5616 PINEHURST WAY

City	State	Zip Code
MECHANICSBURG	PA	17050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121598**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANE DILLON**

Mailing Address 9800 E BEXHILL DR

City	State	Zip Code
KENSINGTON	MD	20895

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

**Transaction ID : SA17A.121600**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DIANE DILLON**

Mailing Address 9800 E BEXHILL DR

City	State	Zip Code
KENSINGTON	MD	20895

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121601**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL DIMICCO**

Mailing Address 1012 FIRETHORNE CLUB DRIVE

City	State	Zip Code
WAXHAW	NC	28173

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.121603**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 416 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL DIMICCO**

Mailing Address 1012 FIRETHORNE CLUB DRIVE

City	State	Zip Code
WAXHAW	NC	28173

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128794**

Date of Receipt

**06 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARILYN DIMICCO**

Mailing Address 1012 FIRETHORNE CLUB DRIVE

City	State	Zip Code
WAXHAW	NC	28173

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128796**

Date of Receipt

**06 / 18 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAGDA W DIMMENDAAL**

Mailing Address 23650 VIA VENETO BLV

City	State	Zip Code
BONITA SPRING	FL	34134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121605**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEN DIPAOLO**

Mailing Address **44 WEST 77TH STREET, APT 10E**

City	State	Zip Code
NEW YORK	NY	10024

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121607**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GIUSEPPE DIPIETRO**

Mailing Address **38 MOUNTAIN ASH LN**

City	State	Zip Code
PEMBROKE	MA	02359

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CELCO CONSTRUCTION CORP**

Occupation  
**CONSTRUCTION**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121609**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ORLANDO N DI RIENZO**

Mailing Address **P.O. BOX 49**

City	State	Zip Code
POTTERSVILLE	NJ	07979

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121611**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ORLANDO N DI RIENZO**

Mailing Address **P.O. BOX 49**

City <b>POTTERSVILLE</b>	State <b>NJ</b>	Zip Code <b>07979</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00**

**Transaction ID : SA17A.121612**

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN DIRKSE**

Mailing Address **6026 W WASHINGTON BOULEVARD**

City <b>WAUWATOSA</b>	State <b>WI</b>	Zip Code <b>53213</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AEGIS CORPORATION**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121614**

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID DITORO**

Mailing Address **501 UNION ST**

City <b>SCHENECTADY</b>	State <b>NY</b>	Zip Code <b>12305</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROSSI & DITORO FUNERAL HOME**

Occupation  
**FUNERAL DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121616**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3150.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERENCE W DITTRICH**

Mailing Address 803 N PONDEROSA DR

City

HARTLAND

State

WI

Zip Code

53029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPANCRETE MACHINERY CORPORATION

Occupation

SALES MANAGER -- SA08 - SALES &

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121618**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ASHLEIGH DIXON**

Mailing Address 19 KAI MAKANI LP #202

City

KIHEI

State

HI

Zip Code

96753

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE ANESTHESIA MEDICAL GROUP INC.

Occupation

ANESTHESIOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121620**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 22 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVE DIXON**

Mailing Address 1101 N. TYRONE DR.

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BECKETT BRONZE CO INC

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121622**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ANTHONY DOBSKI**

Mailing Address 3008 O HENRY DR

City	State	Zip Code
LAREDO	TX	78041

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121624**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MARY DOBSKI**

Mailing Address 3008 O HENRY DR

City	State	Zip Code
LAREDO	TX	78041

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121626**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT DOBSKI**

Mailing Address 14 WORTHINGTON CT

City	State	Zip Code
BLOOMINGTON	IL	61704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PEORIA-BLOOMINGTON MCDONALD'

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.121628**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

4000.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS F DOBSON**

Mailing Address 506 LAKE ST

City	State	Zip Code
MOUNT HOREB	WI	53572

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

228.00

**Transaction ID : SA17A.121629**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH DOCTORA**

Mailing Address 366 S LOWRY STREET

City	State	Zip Code
SMYRNA	TN	37167

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

222.00

**Transaction ID : SA17A.121631**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

222.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRUCE DODGE**

Mailing Address 3252 HILARY CIRCLE

City	State	Zip Code
PALM HARBOR	FL	34684

FEC ID number of contributing federal political committee.

C

Name of Employer  
BOULEVARD AWNING CO.

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121633**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

547.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD G DOERFER**

Mailing Address 6512 WHALEN RD

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121635**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PRESTON DOERFLINGER**

Mailing Address 7915 SOUTH FULTON AVENUE

City	State	Zip Code
TULSA	OK	74136

FEC ID number of contributing federal political committee.

C

Name of Employer  
STATE OF OKLAHOMA

Occupation  
CABINET SECRETARY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121637**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN DOLAN**

Mailing Address 765 ORCHARD AVENUE

City	State	Zip Code
AURORA	IL	60506

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121639**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	5

Amount of Each Receipt this Period

600.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM DOLAN**

Mailing Address 1040 E. OSBORN RD.

6

City

PHOENIX

State

AZ

Zip Code

85014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121641**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2015

15

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID DOLATA**

Mailing Address W2932 KAHL RD

City

MARKESAN

State

WI

Zip Code

53946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121643**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2015

15

2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHAWN DOLLEY**

Mailing Address 1106 21ST ST SOUTH

City

ARLINGTON

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121645**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 21 / 2015

21

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHAWN DOLLEY**

Mailing Address 1106 21ST ST SOUTH

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.121646**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES DOMINSKI**

Mailing Address N8685 STERMAN ROAD

City	State	Zip Code
EAST TROY	WI	53120

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PLUMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121648**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAULA DOMSKE**

Mailing Address 3364 LOWE NETTLE KNOB ROAD

City	State	Zip Code
WEST JEFFERSON	NC	28694

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BUSHHOG AMERICA, INC

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121650**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN M DONALDSON**

Mailing Address P.O. BOX 976

City	State	Zip Code
BELOIT	WI	53512

FEC ID number of contributing federal political committee.

C

Name of Employer  
VIVID, INC.

Occupation  
V.P. & SECRETARY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121652**

Date of Receipt

MM / DD / YYYY  
08 / 17 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUSAN A DONALDSON**

Mailing Address 104 ASPEN GLEN DRIVE

City	State	Zip Code
SPRING GREEN	WI	53588

FEC ID number of contributing federal political committee.

C

Name of Employer  
VIVID INC. THE HOUSE ON

Occupation  
GUIDE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121654**

Date of Receipt

MM / DD / YYYY  
08 / 12 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN DONDANVILLE**

Mailing Address 622 WEST ARLINGTON

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121655**

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM G DONOHUE**

Mailing Address **7 VICKSBURG CT**

City	State	Zip Code
MADISON	WI	53718

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.121656**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J ROBERT DOODY**

Mailing Address **42 CROSS CREEK DRIVE WEST**

City	State	Zip Code
MOUNTAIN BROOK	AL	35213

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121658**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GENE DOOLEY**

Mailing Address **2808 WATERBANK CV**

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121660**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**BILLY DOORNBOS**

Mailing Address **PO BOX 728**

City State Zip Code  
**NEDERLAND TX 77627**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**50.00**

**Transaction ID : SA17A.31523**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-50.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RONALD DOORNINK**

Mailing Address **872 6TH STREET**

City State Zip Code  
**MANHATTAN BEACH CA 90266**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RON DOORNINK**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121662**

Date of Receipt

**09 / 24 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL DORAN**

Mailing Address **3901 47TH STREET NW**

City State Zip Code  
**WASHINGTON DC 20016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HUDSON INSTITUTE**

Occupation  
**WRITER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.121664**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY DORAU**

Mailing Address 579 SOUTHERN OAK CIR

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121666**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAWRENCE DORN**

Mailing Address 1490 LAKESHORE DRIVE

City	State	Zip Code
MENASHA	WI	54952

FEC ID number of contributing federal political committee.

C

Name of Employer  
DORNS DELIVERY & TRANSFER

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121668**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD R DORSCH**

Mailing Address 4731 BONITA BAY BLVD

City	State	Zip Code
BONITA SPRING	FL	34134

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121670**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE DOSTIE**

Mailing Address 7589 BLUE FOX RUN

City	State	Zip Code
WEST CHESTER	OH	45069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.121672**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JERILEE DOTY**

Mailing Address 2112 CENTURY PARK LANE,

City	State	Zip Code
LOST ANGELES	CA	90067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.121674**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

275.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD J DOUBEK**

Mailing Address 6626 W WYANDOT DRIVE

City	State	Zip Code
PALOS HEIGHTS	IL	60463

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121676**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1175.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN DOUBET**

Mailing Address 8801 WERNER RD

City	State	Zip Code
NEW BERLIN	IL	62670

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121678**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SYDNEY DOUMANI**

Mailing Address 8617 LAKERIDGE CIR

City	State	Zip Code
LAS VEGAS	NV	89117-5828

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.121680**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Amount of Each Receipt this Period

700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD DOUSMAN**

Mailing Address 389 E DEERPATH

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121682**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL N DOUTHAT**

Mailing Address 5839 BROOKBANK LN

City	State	Zip Code
MISSION HILLS	KS	66208

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PAUL N DOUTHAT COMPANY INC.

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121684**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREG DOUTHIT**

Mailing Address 232 JUAREZ DR.

City	State	Zip Code
HERMITAGE	TN	37076

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121686**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN DOWD**

Mailing Address 1529 CROWELL ROAD

City	State	Zip Code
VIENNA	VA	22182

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
JOHN M. DOWD LLC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121688**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY DOWNING**

Mailing Address 1829 SHOREHAM DRIVE

City	State	Zip Code
CHARLOTTE	NC	28211

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.121690**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID DOWSON**

Mailing Address 305 NE 91ST STREET

City	State	Zip Code
MIAMI SHORES	FL	33138

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.121692**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			24			2015			

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID DOWSON**

Mailing Address 305 NE 91ST STREET

City	State	Zip Code
MIAMI SHORES	FL	33138

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

730.00

**Transaction ID : SA17A.121693**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

330.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2730.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH DOYLE**

Mailing Address 51 INMAN CIRCLE NE

City	State	Zip Code
ATLANTA	GA	30309

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121695**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES DOZIER**

Mailing Address 60 PERIMETER CENTER PLACE, NE

City	State	Zip Code
ATLANTA	GA	30346

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIMEDY

Occupation  
IT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121697**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK DRAPER**

Mailing Address 1808 BELLAMY OAKS DR

City	State	Zip Code
KNOXVILLE	TN	37922

FEC ID number of contributing federal political committee.

C

Name of Employer  
JACK B DRAPER ATTORNEYS

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121699**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. DAVID DRESHER**

Mailing Address 1819 5TH AVENUE NORTH

City	State	Zip Code
BIRMINGHAM	AL	35203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121701**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ADAM DREWNIAKY**

Mailing Address 30 DANFORD CT

City	State	Zip Code
REDWOOD CITY	CA	94062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SBS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121703**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ADAM DREWNIAKY**

Mailing Address 30 DANFORD CT

City	State	Zip Code
REDWOOD CITY	CA	94062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SBS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.121704**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROY H DRINKARD**

Mailing Address PO BOX 996

City	State	Zip Code
CULLMAN	AL	35055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121706**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHIRLEY DRUM**

Mailing Address 1315 BLACK MOUNTAIN

City	State	Zip Code
HILLSBOROUGH	CA	94010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121708**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SARA DRUMMOND**

Mailing Address 14852 CR 1099

City	State	Zip Code
MONTALBA	TX	75853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121710**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WANDA DRURY**

Mailing Address **467 FARRAR DRIVE**

City	State	Zip Code
CAPE GIRARDEA	MO	63701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121712**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDRA DUBIS**

Mailing Address **7802 TOWN LINE RD**

City	State	Zip Code
WATERFORD	WI	53185

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**BOOKKEEPING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121714**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAY DUBOIS**

Mailing Address **905 RIDGEWOOD ROAD**  
**R**

City	State	Zip Code
ROCKFORD	IL	00000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DUBOIS JAY G MD**

Occupation  
**DOCTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121716**

Date of Receipt

**07 / 06 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAY DUBOIS**

Mailing Address 905 RIDGEWOOD ROAD  
R

City State Zip Code  
ROCKFORD IL 00000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DUBOIS JAY G MD

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.121717**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SAM DUBOSE**

Mailing Address 32 INTERLOCHEN DR NE

City State Zip Code  
ATLANTA GA 30342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WHITE ELECTRICAL CONSTRUCTION

Occupation  
MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121719**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE J DUCAT**

Mailing Address P.O. BOX 1934

City State Zip Code  
APPLETON WI 54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121721**

Date of Receipt

M M / D D / Y Y Y Y  
08 20 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD DUCHOSSOIS**

Mailing Address 65 SPRING CREEK RD

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DUCHOSSOIS GROUP

Occupation  
FOUNDER AND CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121723**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD DUDLEY**

Mailing Address 3225 S 123RD STREET

City	State	Zip Code
WEST ALLIS	WI	53227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121725**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY DUFEK**

Mailing Address 20285 SW 177TH AVE

City	State	Zip Code
MIAMI	FL	33187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121727**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KELLY DUGGAN**

Mailing Address 1205 MORGAN LEFAY LN.

City	State	Zip Code
LEWISVILLE	TX	75056

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121729**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226.25

**Transaction ID : SA17A.121730**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

251.25

**Transaction ID : SA17A.121731**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

310.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

286.25

**Transaction ID : SA17A.121732**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

386.25

**Transaction ID : SA17A.121733**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

396.25

**Transaction ID : SA17A.121734**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

145.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

397.36

**Transaction ID : SA17A.121735**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1.11

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

396.25

**Transaction ID : SA17A.121736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.11

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

406.25

**Transaction ID : SA17A.121737**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

10.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.32

**Transaction ID : SA17A.121738**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

408.39

**Transaction ID : SA17A.121739**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

409.46

**Transaction ID : SA17A.121740**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3.21

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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**A.** Full Name (Last, First, Middle Initial)  
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Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.53

**Transaction ID : SA17A.121741**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.56

**Transaction ID : SA17A.121742**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1.03

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.49

**Transaction ID : SA17A.121743**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1.03

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

409.42

**Transaction ID : SA17A.121744**

Date of Receipt

**07** / **28** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

408.39

**Transaction ID : SA17A.121745**

Date of Receipt

**07** / **28** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.03

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.32

**Transaction ID : SA17A.121746**

Date of Receipt

**07** / **28** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-3.17

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

406.25

**Transaction ID : SA17A.121747**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.34

**Transaction ID : SA17A.121748**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

1.09

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

408.44

**Transaction ID : SA17A.121749**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

1.10

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1.12

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.34

**Transaction ID : SA17A.121750**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.10

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

406.25

**Transaction ID : SA17A.121751**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.09

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.32

**Transaction ID : SA17A.121752**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

-1.12

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

408.39

**Transaction ID : SA17A.121753**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

409.46

**Transaction ID : SA17A.121754**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.53

**Transaction ID : SA17A.121755**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3.21

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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**A. Full Name (Last, First, Middle Initial)**

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Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.60

**Transaction ID : SA17A.121756**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

412.67

**Transaction ID : SA17A.121757**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.60

**Transaction ID : SA17A.121758**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1.07

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 449 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.53

**Transaction ID : SA17A.121759**

Date of Receipt

**07** / **29** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

409.46

**Transaction ID : SA17A.121760**

Date of Receipt

**07** / **29** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

408.39

**Transaction ID : SA17A.121761**

Date of Receipt

**07** / **29** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-3.21

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 450 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.32

**Transaction ID : SA17A.121762**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

406.25

**Transaction ID : SA17A.121763**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.07

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

407.32

**Transaction ID : SA17A.121764**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.07

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

-1.07

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 451 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

408.44

**Transaction ID : SA17A.121765**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1.12

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.44

**Transaction ID : SA17A.121766**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

12.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

430.44

**Transaction ID : SA17A.121767**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

23.12

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 452 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.44

**Transaction ID : SA17A.121768**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-10.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.45

**Transaction ID : SA17A.121769**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.47

**Transaction ID : SA17A.121770**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1.02

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-7.97

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 453 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

423.68

**Transaction ID : SA17A.121771**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1.21

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.47

**Transaction ID : SA17A.121772**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.21

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.45

**Transaction ID : SA17A.121773**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.02

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-1.02

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 454 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.44

**Transaction ID : SA17A.121774**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.66

**Transaction ID : SA17A.121775**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1.22

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.89

**Transaction ID : SA17A.121776**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1.23

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1.44

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 455 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

424.13

**Transaction ID : SA17A.121777**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Amount of Each Receipt this Period

1.24

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.91

**Transaction ID : SA17A.121778**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

CHARGEBACK

Amount of Each Receipt this Period

-1.22

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.68

**Transaction ID : SA17A.121779**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

CHARGEBACK

Amount of Each Receipt this Period

-1.23

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-1.21

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 456 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.93

**Transaction ID : SA17A.121780**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1.25

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.69

**Transaction ID : SA17A.121781**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.24

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.44

**Transaction ID : SA17A.121782**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.25

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-1.24

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.54

**Transaction ID : SA17A.121783**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

1.10

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.44

**Transaction ID : SA17A.121784**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.10

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.46

**Transaction ID : SA17A.121785**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

1.02

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1.02

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.47

**Transaction ID : SA17A.121786**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

423.48

**Transaction ID : SA17A.121787**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

424.48

**Transaction ID : SA17A.121788**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3.02

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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City	State	Zip Code
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FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.49

**Transaction ID : SA17A.121789**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

426.50

**Transaction ID : SA17A.121790**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

427.51

**Transaction ID : SA17A.121791**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3.03

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

428.52

**Transaction ID : SA17A.121792**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

429.53

**Transaction ID : SA17A.121793**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

430.55

**Transaction ID : SA17A.121794**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.02

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3.04

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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City	State	Zip Code
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FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

431.58

**Transaction ID : SA17A.121795**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.03

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

432.64

**Transaction ID : SA17A.121796**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.06

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

433.72

**Transaction ID : SA17A.121797**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.08

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3.17

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

434.84

**Transaction ID : SA17A.121798**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.12

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.96

**Transaction ID : SA17A.121799**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.12

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

437.09

**Transaction ID : SA17A.121800**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.13

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3.37

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 463 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.97

**Transaction ID : SA17A.121801**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.12

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

434.85

**Transaction ID : SA17A.121802**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.12

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

433.77

**Transaction ID : SA17A.121803**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.08

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-3.32

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

432.71

**Transaction ID : SA17A.121804**

Date of Receipt

**08 / 21 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.06

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

431.70

**Transaction ID : SA17A.121805**

Date of Receipt

**08 / 21 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

430.69

**Transaction ID : SA17A.121806**

Date of Receipt

**08 / 21 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-3.08

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
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City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

429.69

**Transaction ID : SA17A.121807**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

428.68

**Transaction ID : SA17A.121808**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

427.67

**Transaction ID : SA17A.121809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

-3.02

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

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**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

426.66

**Transaction ID : SA17A.121810**

Date of Receipt

**08 / 21 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.65

**Transaction ID : SA17A.121811**

Date of Receipt

**08 / 21 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

424.64

**Transaction ID : SA17A.121812**

Date of Receipt

**08 / 21 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-1.01

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-3.03

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 467 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

423.62

**Transaction ID : SA17A.121813**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.02

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.59

**Transaction ID : SA17A.121814**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.03

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.46

**Transaction ID : SA17A.121815**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.13

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-3.18

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 468 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.60

**Transaction ID : SA17A.121816**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.14

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

423.75

**Transaction ID : SA17A.121817**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.15

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.60

**Transaction ID : SA17A.121818**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.15

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1.14

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.46

**Transaction ID : SA17A.121819**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.14

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.46

**Transaction ID : SA17A.121820**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

1.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

424.46

**Transaction ID : SA17A.121821**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

2.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1.86

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

427.46

**Transaction ID : SA17A.121822**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

3.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

426.46

**Transaction ID : SA17A.121823**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

424.46

**Transaction ID : SA17A.121824**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-2.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421.46

**Transaction ID : SA17A.121825**

Date of Receipt

**08** / **21** / **2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-3.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

451.46

**Transaction ID : SA17A.121826**

Date of Receipt

**08** / **26** / **2015**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

461.46

**Transaction ID : SA17A.121827**

Date of Receipt

**09** / **10** / **2015**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

37.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 472 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

961.46

**Transaction ID : SA17A.121828**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

962.56

**Transaction ID : SA17A.121829**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			17			2015			

Amount of Each Receipt this Period

1.10

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

963.67

**Transaction ID : SA17A.121830**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			17			2015			

Amount of Each Receipt this Period

1.11

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

502.21

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 473 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

964.68

**Transaction ID : SA17A.121831**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

966.68

**Transaction ID : SA17A.121832**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

2.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

967.88

**Transaction ID : SA17A.121833**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

1.20

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

4.21

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CALEB DUKE**

Mailing Address 13501 WEST RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INSOURCECODE

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

968.89

**Transaction ID : SA17A.121834**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

1.01

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDRA DULIN**

Mailing Address 7066 NORWAY RD

City	State	Zip Code
SUN PRAIRIE	WI	53590

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121835**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAX DUNCAN**

Mailing Address 95 SKIDAWAY ISLAND P  
2

City	State	Zip Code
SAVANNAH	GA	31411

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121836**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

301.01

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MAX DUNCAN**

Mailing Address 95 SKIDAWAY ISLAND P  
2

City State Zip Code  
SAVANNAH GA 31411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.121837**

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD DUNCKLEE**

Mailing Address 6267 SHADOW TREE LN

City State Zip Code  
LAKE WORTH FL 33463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121839**

Date of Receipt

M M / D D / Y Y Y Y  
08 13 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN DUNION**

Mailing Address 105 SANTA ROSA PLACE

City State Zip Code  
SANTA BARBARA CA 93109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CKE RESTAURANTS HOLDINGS INC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121841**

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTY A DUNKELBERG**

Mailing Address 79 SMOKERISE PT

City	State	Zip Code
PEACHTREE CIT	GA	30269

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121843**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES DUNMYER**

Mailing Address 4440 W SAMARIA ROAD

City	State	Zip Code
TEMPERANCE	MI	48182

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121845**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD DUNN**

Mailing Address 6034 E VIEWMONT DR

City	State	Zip Code
MESA	AZ	85215

FEC ID number of contributing federal political committee.

C

Name of Employer  
CORROSION E#ENGINEERING INC.

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.32670**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERIC L DUNN**

Mailing Address 11691 PETTIT ST

City	State	Zip Code
MORENO VALLEY	CA	92555

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ALESHIRE & WYNDER, LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121847**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL DUNN**

Mailing Address 3492 N TRAINER ROAD

City	State	Zip Code
ROCKFORD	IL	61114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DOCKERSON NIEMAN**

Occupation  
**REALTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121849**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID DUNNAVANT**

Mailing Address 331 RESERVE RIDGE DR.

City	State	Zip Code
HUFFMAN	TX	77336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MARABOU MIDSTREAM SERVICES**

Occupation  
**OIL & GAS MIDSTREAM**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121851**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM DUNNAVANT**

Mailing Address **219 BRIARWOOD CIRCLE**

City <b>ATHENS</b>	State <b>AL</b>	Zip Code <b>35613</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121853**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID DUPPLER**

Mailing Address **9 WOODBURY CT**

City <b>APPLETON</b>	State <b>WI</b>	Zip Code <b>54913</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121855**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNIS DUQUETTE**

Mailing Address **208 LONGHILL STREET**

City <b>SPRINGFIELD</b>	State <b>MA</b>	Zip Code <b>01108</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FIDELITY INVESTMENTS**

Occupation  
**VICE PRESIDENT - CORPORATE SPONSORSHIP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121857**

Date of Receipt

**06 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**VICKERY DYE**

Mailing Address 793 BISHOPS CIRCLE

City	State	Zip Code
EVANS	GA	30809

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SOUTHEAST PUMP SPECIALIST, INC.

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121859**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES DYER**

Mailing Address 123 TERRACE DRIVE

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121861**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT A. DYER JR**

Mailing Address P.O. BOX #103

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121863**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LISA A DYKEMA**

Mailing Address 1535 FOX RIDGE COURT

City	State	Zip Code
DEPERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CIRCLE PACKAGING MACHIN

Occupation  
FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121865**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES E DZIAK**

Mailing Address 320 MCGRATH LN

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

303.00

**Transaction ID : SA17A.121866**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LEONARD DZIUBLA**

Mailing Address 999 KINGS RD

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHOENIX CARE SYSTEMS, INC.

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121868**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NADEAN EADS**

Mailing Address 18305 KITZMAN RD

City	State	Zip Code
CYPRESS	TX	77429

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121870**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN EARHART**

Mailing Address 1370 PRITCHETT CT

City	State	Zip Code
LOS ALTOS	CA	94024

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121872**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FORREST L EARLABAUGH**

Mailing Address 3701 SEASCAPE DR

City	State	Zip Code
HUNTINGTON BE	CA	92649

FEC ID number of contributing federal political committee.

C

Name of Employer  
BEACON CONCRETE INC

Occupation  
CO-OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.121874**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**R. EASTLAND**

Mailing Address 2689 HIGHWAY 39

City	State	Zip Code
HUNT	TX	78024

FEC ID number of contributing federal political committee.

**C**

Name of Employer

R G EASTLAND

Occupation

DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121876**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM EATON**

Mailing Address 31671 ISLE ROYAL DR

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121877**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAN EBERHART**

Mailing Address 11451 KATY FWY, SUITE 505

City	State	Zip Code
HOUSTON	TX	77079

FEC ID number of contributing federal political committee.

**C**

Name of Employer

CANARY, LLC

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121879**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACOB EBERHART**

Mailing Address 2800 KIRBY DR

City

HOUSTON

State

TX

Zip Code

77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CANARY, LLC

Occupation

VP OF COMMUNICATIONS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121881**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID R EBERT**

Mailing Address 6130 CULPEPPER LN

City

MADISON

State

WI

Zip Code

53718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NERCON ENG & MFG

Occupation

FIELD SERVICE SUPERVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121883**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 22 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID R EBERT**

Mailing Address 6130 CULPEPPER LN

City

MADISON

State

WI

Zip Code

53718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NERCON ENG & MFG

Occupation

FIELD SERVICE SUPERVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121884**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 26 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANE EBERT**

Mailing Address 95 ASH ST

City	State	Zip Code
CRESSONA	PA	17929

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121886**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FREDERICK ECK**

Mailing Address 215 WEST MADISON AVENUE

City	State	Zip Code
WHEATON	IL	60187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE RANDOLPH GROUP

Occupation  
JOB CREATOR/INNOVATION SPONSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121888**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT ECK**

Mailing Address 245 DAYBREAK LN

City	State	Zip Code
SOUTHPORT	CT	06890

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121890**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENNIFER ECKER**

Mailing Address 7204 COUNTY LINE RD

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

C

Name of Employer  
BMO

Occupation  
BMO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.121891**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		30		2015

Amount of Each Receipt this Period

125.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GRACE ECKLAND**

Mailing Address N2315 CHAPIN ROAD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121893**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET EDDY**

Mailing Address 1300 N MAIN ST

City	State	Zip Code
SIKESTON	MO	63801

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121895**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

625.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROLAND & EDDY**

Mailing Address 1273 SIMEON PL

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121897**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOMMY EDGAR**

Mailing Address 18172 E 810 RD

City	State	Zip Code
KINGFISHER	OK	73750

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.121899**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**IRINA EDIRISINGH**

Mailing Address 3905 N PROSPECT AVE

City	State	Zip Code
SHOREWOOD	WI	53211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
VELICON

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121901**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5603.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CECIL EDIRISINGHE**

Mailing Address **3905 NORTH PROSPECT AVENUE**

City	State	Zip Code
SHOREWOOD	WI	53211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VELICON**

Occupation  
**BUSINESS OWENER-ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121903**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES EDWARDS**

Mailing Address **34482 CEDARFIELD DR**

City	State	Zip Code
DADE CITY	FL	33523

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.121905**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**E A EDWARDS**

Mailing Address **124 MOUNTAIN VIEW DR**

City	State	Zip Code
FAIRFIELD GLADE	TN	38558

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121907**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1453.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JULIA EDWARDS**

Mailing Address **1408 COMMUNITY LANE**

City <b>MIDLAND</b>	State <b>TX</b>	Zip Code <b>79701</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WHITE STAR ENERGY**

Occupation  
**OIL & GAS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121909**

Date of Receipt

M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROGER EGLAND**

Mailing Address **110 GRAND AVE.**

City <b>STORM LAKE</b>	State <b>IA</b>	Zip Code <b>50588</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121911**

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DENNIS EHRREICH**

Mailing Address **10 HITCHING POST RD**

City <b>LAKEVILLE</b>	State <b>MA</b>	Zip Code <b>02347</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ERCON INC.**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121913**

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3950.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID PATRICK EICH**

Mailing Address **19 LAWRENCE COURT**

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KIRKLAND & ELLIS LLP**

Occupation  
**PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121915**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID PATRICK EICH**

Mailing Address **19 LAWRENCE COURT**

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KIRKLAND & ELLIS LLP**

Occupation  
**PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.121916**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID PATRICK EICH**

Mailing Address **19 LAWRENCE COURT**

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KIRKLAND & ELLIS LLP**

Occupation  
**PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.121916.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID PATRICK EICH**

Mailing Address **19 LAWRENCE COURT**

City <b>APPLETON</b>	State <b>WI</b>	Zip Code <b>54911</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KIRKLAND & ELLIS LLP**

Occupation  
**PARTNER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.121916.1**

Date of Receipt

**08 / 24 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUGLAS EIDSON**

Mailing Address **2874 NORTH HILLS DRIVE**

City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30305</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AVISON YOUNG**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121918**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY F EISENBERG**

Mailing Address **24 STANFORD AVE**

City <b>WEST ORANGE</b>	State <b>NJ</b>	Zip Code <b>07052</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PERKINS COIE LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121920**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES EKBERG**

Mailing Address **6345 SW DOLPH DRIVE**

City	State	Zip Code
PORTLAND	OR	97219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121922**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KEITH L ELDREDGE**

Mailing Address **79 BIG ROCK DR**

City	State	Zip Code
DOVER	PA	17315

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RKL**

Occupation  
**PARTNER AUDIT SERVICE GR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121924**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT ELEY**

Mailing Address **125 26TH ST NW**

City	State	Zip Code
EAST WENATCHE	WA	98802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**550.00**

**Transaction ID : SA17A.121926**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

**550.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1800.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ELIOT AND BONNIE ELFNER**

Mailing Address 3240 BITTERS CT

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121928**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**YALI ELKIN**

Mailing Address 583 GRENVILLE AVE

City	State	Zip Code
TEANECK	NJ	07666

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LUCINA, LLC

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121930**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL ELLENTUCK**

Mailing Address 2912 WHITE DOVE DR

City	State	Zip Code
PLANO	TX	75093

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LEGACY SENIOR COMMUNITIES

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121932**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

750.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES ELLER**

Mailing Address 3687 CONRAD AVE.

City	State	Zip Code
SAN DIEGO	CA	92117

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121934**

Date of Receipt

**06 / 30 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES ELLER**

Mailing Address 3687 CONRAD AVE.

City	State	Zip Code
SAN DIEGO	CA	92117

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121935**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES ELLER**

Mailing Address 3687 CONRAD AVE.

City	State	Zip Code
SAN DIEGO	CA	92117

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

610.00

**Transaction ID : SA17A.121936**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

610.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL ELLGEN**

Mailing Address 2104 W 1ST ST

City	State	Zip Code
FORT MYERS	FL	33901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121938**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CURTIS ELLIOTT**

Mailing Address 4401 BARCLAY DOWNS DRIVE SUITE 200

City	State	Zip Code
CHARLOTTE	NC	28209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CULP ELLIOT & CARPENTER PLLC

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121940**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID ELLIOTT**

Mailing Address 6621 TALMADGE LN

City	State	Zip Code
DALLAS	TX	75230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121942**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID ELLIOTT**

Mailing Address 6621 TALMADGE LN

City	State	Zip Code
DALLAS	TX	75230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.121943**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID ELLIOTT**

Mailing Address 6621 TALMADGE LN

City	State	Zip Code
DALLAS	TX	75230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4700.00

**Transaction ID : SA17A.121944**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID ELLIOTT**

Mailing Address 6621 TALMADGE LN

City	State	Zip Code
DALLAS	TX	75230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121944.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID ELLIOTT**

Mailing Address **6621 TALMADGE LN**

City	State	Zip Code
DALLAS	TX	75230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**4700.00**

**Transaction ID : SA17A.121944.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

**REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015**

Amount of Each Receipt this Period

**2000.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**W. C ELLIOTT**

Mailing Address **4401 BARCLAY DOWNS DRIV**

City	State	Zip Code
CHARLOTTE	NC	28209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121946**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROY ELLIS**

Mailing Address **1102 BUFFALO RIDGE ROAD**

City	State	Zip Code
CASTLE PINES	CO	80108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ERNST & YOUNG**

Occupation  
**ENERGY CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121948**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE ELLIS JR.**

Mailing Address **1824 MILVALE RD**

City <b>ANNAPOLIS</b>	State <b>MD</b>	Zip Code <b>21409</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121950**

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GREG ELLISON**

Mailing Address **2127 E BASELINE**

City <b>TEMPE</b>	State <b>AZ</b>	Zip Code <b>85283</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ADVANCED MEDICAL CENTER**

Occupation  
**DOCTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121952**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DAVID ELMER**

Mailing Address **2225 N 1000 E**

City <b>WHITESTOWN</b>	State <b>IN</b>	Zip Code <b>46075</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INDIANA-AMERICAN WATER**

Occupation  
**ENGINEERING MANAG**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121954**

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1250.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY C ELORANTA**

Mailing Address W262N3051 PROSPECT A

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121956**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID ELSON**

Mailing Address 513 E PLUM CREEK ROAD

City	State	Zip Code
SIOUX FALLS	SD	57105

FEC ID number of contributing federal political committee.

C

Name of Employer  
AVERA MCKENNAN HOSPITAL

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121957**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LOIS H ELSON**

Mailing Address 11819 SANDMAN ST

City	State	Zip Code
SAN ANTONIO	TX	78216

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.121959**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LOIS H ELSON**

Mailing Address 11819 SANDMAN ST

City	State	Zip Code
SAN ANTONIO	TX	78216

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.121960**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GAYLE ELTON**

Mailing Address 980 SAN JOSE DR

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MIKES ICE INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121962**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARO J EMERZIAN**

Mailing Address 801 KENTON RD

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EMERZIAN GARO J DPM

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121964**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD C EMMA**

Mailing Address **W1144 SIENA CIR**

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOCKEY INTERNATIONAL**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.121966**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY EMMI**

Mailing Address **1601 MILLTOWN ROAD, SUITE 25**

City	State	Zip Code
WILMINGTON	DE	19808

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121968**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VICTORIA EMMONS**

Mailing Address **9044 LONGVIEW DRIVE**

City	State	Zip Code
PLEASANTON	CA	94588-8201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.121970**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN ENDRIES**

Mailing Address 2215 S KINNICKINNIC

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HAIR EXPERIENCE LLC**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.121972**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEBRA ENESTVEDT**

Mailing Address 850 BLUEBILL BAY ROAD

City	State	Zip Code
BURNSVILLE	MN	55306

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.121974**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAREN R ENGELHARD**

Mailing Address 4309 JANICK CIR N

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.121976**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3150.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN L. ENGELS JR**

Mailing Address POB 8132

City	State	Zip Code
ASPEN	CO	81612

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121978**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DIANA ENGLE**

Mailing Address 51707 COUNTY ROAD 33

City	State	Zip Code
BRISTOL	IN	46507

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BENNINGTON

Occupation  
V P ADMINISTRATION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.121980**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM J ENRIGHT**

Mailing Address 3524 EURO LANE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121982**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES ENTENMANN**

Mailing Address PO BOX 612

City State Zip Code  
**BRIGHTWATERS NY 11718**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121984**

Date of Receipt

**08 / 28 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DIANE EPSTEIN**

Mailing Address 10501 WILLOWBROOKE DRIVE

City State Zip Code  
**POTOMAC MD 20854**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121986**

Date of Receipt

**08 / 30 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL EPSTEIN**

Mailing Address 5410 EDSON LANE

City State Zip Code  
**ROCKVILLE MD 20852**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WILLOW ASSET MANAGEMENT

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.121988**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

8100.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRIS ERICKSON**

Mailing Address **N5254 LAKESHORE DRIVE**

City <b>KEWAUNEE</b>	State <b>WI</b>	Zip Code <b>54216</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CST LINES INC**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121990**

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FELIX ERLBUSCH**

Mailing Address **5760 LAKE BRIAR DR**

City <b>MILLSTADT</b>	State <b>IL</b>	Zip Code <b>62260</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.121992**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period

**225.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HENRY J ERNEST**

Mailing Address **8795 PIQUA LOCKINGTO**

City <b>PIQUA</b>	State <b>OH</b>	Zip Code <b>45356</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.121994**

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1225.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN S ERTHEIN**

Mailing Address PO BOX 3154

City	State	Zip Code
RANCHO SANTA	CA	92067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.121996**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN ERWIN**

Mailing Address 201 FALCON LANE

City	State	Zip Code
HILLSBORO	TX	76645

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.121998**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FREDRIC ESHELMAN**

Mailing Address 319 N 3RD ST

City	State	Zip Code
WILMINGTON	NC	28401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ESHelman VENTURES LLC

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122000**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3903.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT ESPERSEN**

Mailing Address 3219 S. EDWARD DRIVE

City	State	Zip Code
TEMPE	AZ	85282

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122002**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM W ESPY**

Mailing Address 3715 NORTHSIDE PKWY

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UNIVERSITY OF GEORGIA

Occupation  
BOARD OF TRUSTEES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122004**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			17			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFFREY ESSMANN**

Mailing Address P.O. BOX 80945

City	State	Zip Code
BILLINGS	MT	59108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ESS-TECH LLC

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122006**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			23			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TIMOTHY ESTES**

Mailing Address 3123 PARTHENON AVENUE

City	State	Zip Code
NASHVILLE	TN	37203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DIGIAL PLEASENING

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122008**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VERN EULERT**

Mailing Address 7550 KETTLE VIEW DR

City	State	Zip Code
WEST BEND	WI	53090

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ENROLLED AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122010**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN EVANS**

Mailing Address 216 KINGSTORD CROSSING

City	State	Zip Code
ACWORTH	GA	30101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MIMEDX

Occupation  
VP, FINANCIAL PLANNING ANALYSIS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122012**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN EVANS**

Mailing Address P.O. BOX 458

City	State	Zip Code
INDIANOLA	WA	98342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CONNEX SOLUTIONS**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122014**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL EVANS**

Mailing Address 22 SMITHPORT ROAD

City	State	Zip Code
UTICA	NY	13501-5822

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**M. GRIFFITH INVESTMENT SERVICES, INC.**

Occupation  
**FINANCIAL PLANNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122016**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEAN EVERSON**

Mailing Address N8670 DECORAH LN

City	State	Zip Code
FOND DU LAC	WI	54937

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122018**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH EVERSON**

Mailing Address **N1556 COUNTY ROAD O**

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SUSSEX IM**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122020**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEITH EVERSON**

Mailing Address **N1556 COUNTY ROAD O**

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SUSSEX IM**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.122021**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEITH EVERSON**

Mailing Address **N1556 COUNTY ROAD O**

City	State	Zip Code
HARTFORD	WI	53027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SUSSEX IM**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122021.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MONICA EVERSON**

Mailing Address **N1556 COUNTY ROAD**

City <b>HARTFORD</b>	State <b>WI</b>	Zip Code <b>53027</b>
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FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122021.1**

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**500.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT EVERTZ**

Mailing Address **2440 VIRGINIA AVE NW D1207**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20037</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EVERTZ GROUP LLC**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122023**

Date of Receipt

M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TED EWING**

Mailing Address **3630 S HAMPTON DR**

City <b>BETTENDORF</b>	State <b>IA</b>	Zip Code <b>52722</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**235.00**

**Transaction ID : SA17A.122024**

Date of Receipt

M M / D D / Y Y Y Y
07 / 25 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**350.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AUGIE K FABELA**

Mailing Address 3320 GRAND CYPRESS DRIV

City	State	Zip Code
NAPLES	FL	34119

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122026**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES FAGAN**

Mailing Address 6 CALVIN ROAD

City	State	Zip Code
WESTON	CT	06883

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122028**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BILL FAIN**

Mailing Address 3001 N MAIN ST

City	State	Zip Code
PRESCOTT VALLEY	AZ	86314

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FAIN SIGNATURE GROUP

Occupation  
FOUNDER/ CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122029**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BILL FAIN**

Mailing Address 3001 N MAIN ST

City	State	Zip Code
PRESCOTT VALLEY	AZ	86314

FEC ID number of contributing federal political committee.

C

Name of Employer  
FAIN SIGNATURE GROUP

Occupation  
FOUNDER/ CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.122030**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES A FAIVRE**

Mailing Address 7374 LEPK LN

City	State	Zip Code
CUSTER	WI	54423

FEC ID number of contributing federal political committee.

C

Name of Employer  
FAIVRE IMPLEMENT INC.

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122032**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES A FAIVRE**

Mailing Address 7374 LEPK LN

City	State	Zip Code
CUSTER	WI	54423

FEC ID number of contributing federal political committee.

C

Name of Employer  
FAIVRE IMPLEMENT INC.

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122033**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

750.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****MICHAEL J FALBO**

Mailing Address 7401 W MORNINGSIDES COUR

City	State	Zip Code
FRANKLIN	WI	53132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122035**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****RALPH D FALCONER**

Mailing Address 3680 N 26TH W

City	State	Zip Code
IDAHO FALLS	ID	83402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122037**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****RAYMOND FALKNER**

Mailing Address 7625 HILLSIDE DR

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122039**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL S FALSTAD**

Mailing Address 4600 DEER PARK RD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122041**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIMOTHY A FANNING**

Mailing Address 3 GRANT SQ  
P

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FITZPATRICK FANNING CORPORAT

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122043**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BEN FARAH**

Mailing Address 3702 S VIRGINIA ST STE

City	State	Zip Code
RENO	NV	89502

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122045**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LELIA FARR**

Mailing Address **1 FAIR OAKS DRIVE**

City	State	Zip Code
ST. LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122047**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LELIA FARR**

Mailing Address **1 FAIR OAKS DRIVE**

City	State	Zip Code
ST. LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122048**

Date of Receipt

**07 / 16 / 2015**

REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER FARRELL**

Mailing Address **7220 ROMERO DRIVE**

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RES MED**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122050**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD FARRELL**

Mailing Address 810 TYVOLA ROAD STE 132

City	State	Zip Code
CHARLOTTE	NC	28217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122052**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD FARRELL**

Mailing Address 810 TYVOLA ROAD STE 132

City	State	Zip Code
CHARLOTTE	NC	28217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.122053**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMY FARROW**

Mailing Address 245 HILLWOOD CT

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HORIZON SCHOOL

Occupation  
COUNSELOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122055**

Date of Receipt

**07 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AMY FARROW**

Mailing Address **245 HILLWOOD CT**

City <b>PEWAUKEE</b>	State <b>WI</b>	Zip Code <b>53072</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HORIZON SCHOOL**

Occupation  
**COUNSELOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122056**

Date of Receipt

**07 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-500.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET FARROW**

Mailing Address **W262N2402 DEER HAVEN**

City <b>PEWAUKEE</b>	State <b>WI</b>	Zip Code <b>53072</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**UW SYSTEM**

Occupation  
**MEMEBER OF THE UW SYSYTE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122058**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHELLE FARROW**

Mailing Address **18731 64TH AVENUE**

City <b>CHIPPEWA FALLS</b>	State <b>WI</b>	Zip Code <b>54729</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122060**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL FARROW**

Mailing Address **245 HILLWOOD CT**

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOUSE TO HOME INSPECTIONS, INC.**

Occupation  
**REALTOR -- RE02 - REAL ESTATE -**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122062**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

REATTRIBUTED

Amount of Each Receipt this Period

**500.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT FATES**

Mailing Address **179 E LAKE SHORE DR**

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INVESTOR**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122064**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT FAVRE**

Mailing Address **7044 STENNIS AIRPORT ROAD**

City	State	Zip Code
KILN	MS	39556

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FAVRE PA, LLC**

Occupation  
**PUBLIC INSURANCE ADJUSTER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122066**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHLEEN FAZIO**

Mailing Address 9 CHAPEL HILL ROAD

City

WESTPORT

State

CT

Zip Code

06880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122068**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICIA FEAST**

Mailing Address 2762 CREST AVENUE SOUTH

City

ALLENTOWN

State

PA

Zip Code

18104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122070**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS FEE**

Mailing Address 1221 NE 95TH AVE

City

VANCOUVER

State

WA

Zip Code

98664

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIAD MACHINERY

Occupation

SALESMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122071**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BETHANY FEELEY**

Mailing Address 610 LAUREL

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122073**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN FEELEY**

Mailing Address 610 LAUREL AVENUE

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122075**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT FEENEY**

Mailing Address 1418 N RHODES ST., APT 130

City	State	Zip Code
ARLINGTON	VA	22209

FEC ID number of contributing federal political committee.

C

Name of Employer  
ROCKWELL COLLINS

Occupation  
DIR., INT'L RELATIONS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.122077**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Amount of Each Receipt this Period

750.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 521 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEN FEES**

Mailing Address 5716 COUNTY ROAD R

City	State	Zip Code
MANITOWOC	WI	54220

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
BAR OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

352.00

**Transaction ID : SA17A.122078**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

242.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH FELDMAN**

Mailing Address 225 MILLBURN AVE

City	State	Zip Code
MILLBURN	NJ	07041

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY AT LAW

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122080**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PHILLIP FELICIANO**

Mailing Address 13701TURNMORE ROAD

City	State	Zip Code
SILVER SPRING	MD	20906

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1742.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 522 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES FELTES**

Mailing Address PO BOX 54

City	State	Zip Code
OSSEO	WI	54758

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CHARLES V FELTES, SC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122083**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES FELTES**

Mailing Address PO BOX 54

City	State	Zip Code
OSSEO	WI	54758

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CHARLES V FELTES, SC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122084**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			28			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JACQUELI A FELTZ**

Mailing Address 6290 5TH STREET

City	State	Zip Code
STEVENS POINT	WI	54482

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122086**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROY FENN**

Mailing Address **1188 NE 27TH ST**  
**UNIT 113**

City **BEND** State **OR** Zip Code **97701**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer **U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT** Occupation **FEDERAL GOVERNMENT EMPLOYEE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122088**

Date of Receipt

**07** / **16** / **2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN FENNEBRESQUE**

Mailing Address **201 N TRYON STREET, SUITE 300**

City **CHARLOTTE** State **NC** Zip Code **28202**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer **MCGUIRE WOODS LLP** Occupation **LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122090**

Date of Receipt

**06** / **19** / **2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN FENNEBRESQUE**

Mailing Address **201 N TRYON STREET, SUITE 300**

City **CHARLOTTE** State **NC** Zip Code **28202**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer **MCGUIRE WOODS LLP** Occupation **LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122091**

Date of Receipt

**08** / **13** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN FENNEBRESQUE**

Mailing Address 201 N TRYON STREE, SUITE 300

City	State	Zip Code
CHARLOTTE	NC	28202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MCGUIRE WOODS LLP

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122091.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANCES FENNEBRESQUE**

Mailing Address 201 N TYRON STREET  
SUITE 300

City	State	Zip Code
CHARLOTTE	NC	28202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122091.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BOB FERGUSON**

Mailing Address 30448 RANCHO VIEJO R

City	State	Zip Code
SAN JUAN CAPI	CA	92675

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FERGUSON BOB GEOLOGICAL CONS

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122093**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANE M FERGUSON**

Mailing Address 35225 BEACH RD

City	State	Zip Code
CAPISTRANO BE	CA	92624

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.122095**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT FERGUSON**

Mailing Address 307 AMBLEWOOD CIRCLE

City	State	Zip Code
GREENSBURG	PA	15601

FEC ID number of contributing federal political committee.

C

Name of Employer  
RENAL & ELECTROLYTE ASSOCIATES

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122097**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER K FERGUSON**

Mailing Address 2102 MEADOWBROOK DRIVE

City	State	Zip Code
AUSTIN	TX	78703

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122099**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LAZARO FERNANDEZ**

Mailing Address **5424 N CYNTHIA ST**

City	State	Zip Code
MCALLEN	TX	78504

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NOVEL DESIGN CENTRE**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122101**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN M FEROLITO**

Mailing Address **1135 HILLSBORO MILE**

City	State	Zip Code
HILLSBORO BEA	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FEROLITO, VULTAGGIO, & SONS**

Occupation  
**PRESIDENT/CO-OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**10800.00**

**Transaction ID : SA17A.122103**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

**10800.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN M FEROLITO**

Mailing Address **1135 HILLSBORO MILE**

City	State	Zip Code
HILLSBORO BEA	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FEROLITO, VULTAGGIO, & SONS**

Occupation  
**PRESIDENT/CO-OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122103.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

REATTRIBUTION TO CAROLYN FEROLITO

Amount of Each Receipt this Period

**-5400.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**11050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLYN FEROLITO**

Mailing Address 1135 HILLSBORO MILE

City	State	Zip Code
HILLSBORO BEACH	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122103.1**

Date of Receipt

**07 / 31 / 2015**

REATTRIBUTION FROM JOHN FEROLITO; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROLYN FEROLITO**

Mailing Address 1135 HILLSBORO MILE

City	State	Zip Code
HILLSBORO BEACH	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122103.2**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROLYN FEROLITO**

Mailing Address 1135 HILLSBORO MILE

City	State	Zip Code
HILLSBORO BEACH	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122103.3**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN M FEROLITO**

Mailing Address 1135 HILLSBORO MILE

City	State	Zip Code
HILLSBORO BEA	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FEROLITO, VULTAGGIO, & SONS**

Occupation  
**PRESIDENT/CO-OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122103.4**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN M FEROLITO**

Mailing Address 1135 HILLSBORO MILE

City	State	Zip Code
HILLSBORO BEA	FL	33062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FEROLITO, VULTAGGIO, & SONS**

Occupation  
**PRESIDENT/CO-OWNER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122103.5**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RENEE FERRARA**

Mailing Address 4231 N OLSEN AVENUE

City	State	Zip Code
SHOREWOOD	WI	53211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**J HILBURN**

Occupation  
**MANAGING PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122105**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT FERREE**

Mailing Address PT 442 3250 CHANATE RD.

City	State	Zip Code
SANTA AROSA	CA	95404

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122107**

Date of Receipt

**08 / 26 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN FERY**

Mailing Address P.O. BOX 15407

City	State	Zip Code
BOISE	ID	83715

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122109**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFFREY FETTERS**

Mailing Address 5100 MEADVILLE STREET

City	State	Zip Code
EXCELSIOR	MN	55331

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122111**

Date of Receipt

**08 / 21 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARIA FEWER**

Mailing Address 370 S WASHINGTON STREET

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122113**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEAN E FICHT**

Mailing Address 10238 BIG CANOE

City	State	Zip Code
BIG CANOE	GA	30143

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.122114**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA FICKESS**

Mailing Address 1651 ROUTE 68

City	State	Zip Code
NEW BRIGHTON	PA	15066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FICKESS PUMPS INC.

Occupation  
SALES ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122116**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

575.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

PATRICIA FICKESS

Mailing Address 1651 ROUTE 68

City	State	Zip Code
NEW BRIGHTON	PA	15066

FEC ID number of contributing federal political committee.

C

Name of Employer  
FICKESS PUMPS INC.Occupation  
SALES ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.122117**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

PATRICIA FICKESS

Mailing Address 1651 ROUTE 68

City	State	Zip Code
NEW BRIGHTON	PA	15066

FEC ID number of contributing federal political committee.

C

Name of Employer  
FICKESS PUMPS INC.Occupation  
SALES ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

**Transaction ID : SA17A.122118**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

PATRICIA FICKESS

Mailing Address 1651 ROUTE 68

City	State	Zip Code
NEW BRIGHTON	PA	15066

FEC ID number of contributing federal political committee.

C

Name of Employer  
FICKESS PUMPS INC.Occupation  
SALES ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

355.00

**Transaction ID : SA17A.122119**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

20.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

105.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REBECA FIDELER**

Mailing Address 946 S LAKESHORE DRIVE

City	State	Zip Code
FONTANTA	WI	53125

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122121**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD FIEDLER**

Mailing Address 1896 397 AVE NE

City	State	Zip Code
STANCHFIELD	MN	55080

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122123**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 22 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTINE FIELD**

Mailing Address PO BOX 6127

City	State	Zip Code
KETCHUM	ID	83340

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122125**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT C FIELD**

Mailing Address **3742 E FAIRWAY DRIVE**

City <b>BIRMINGHAM</b>	State <b>AL</b>	Zip Code <b>35213</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122127**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUZANNE FIELD**

Mailing Address **1550 WISCONSIN DELLS**

City <b>WISCONSIN DEL</b>	State <b>WI</b>	Zip Code <b>53965</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DELLS DUCK TOURS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.122129**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM FIELDS**

Mailing Address **PO BOX 87**

City <b>WARM SPRINGS</b>	State <b>VA</b>	Zip Code <b>24484</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122131**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN FIFIELD**

Mailing Address **222 S RIVERSIDE PLAZA**  
**SUITE 600**

City **CHICAGO** State **IL** Zip Code **60606**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FRC REALTY, INC.**

Occupation  
**REAL ESTATE DEVELOPER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122133**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**H. DUSTIN FILLMORE**

Mailing Address **2712 MANORWOOD TRAIL**

City **FORT WORTH** State **TX** Zip Code **76109**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122135**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUZANNE E FILUT**

Mailing Address **W5202 LARSON RD**

City **RIO** State **WI** Zip Code **53960**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ROLFER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122137**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BETTE FINGER**

Mailing Address 1551 N DIANE ST

City	State	Zip Code
MESA	AZ	85203

FEC ID number of contributing federal political committee.

C

Name of Employer  
HYLAND BAY

Occupation  
HOME BUILDING SERVICE PROVIDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122139**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID A FINK**

Mailing Address 61 CHRISTIAN HILL RD

City	State	Zip Code
AMHERST	NH	03031

FEC ID number of contributing federal political committee.

C

Name of Employer  
PAN-AMERICAN AIRLINES INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122141**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYMOND FINK**

Mailing Address 1530 NOBLE ROAD

City	State	Zip Code
WILLIAMSTON	MI	48895

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

**Transaction ID : SA17A.122142**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RAYMOND FINK**

Mailing Address 1530 NOBLE ROAD

City	State	Zip Code
WILLIAMSTON	MI	48895

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

415.00

**Transaction ID : SA17A.122143**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

110.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BERTRAM FINN**

Mailing Address 61 KINGS CT

City	State	Zip Code
SAN JUAN	PR	00926

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122144**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN FINN**

Mailing Address 1113 LEAFREE CT

City	State	Zip Code
CINCINNATI	OH	45208

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122146**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1260.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED FISCHER**

Mailing Address **N21W24260 CUMBERLAND DR**

City <b>PEWAUKEE</b>	State <b>WI</b>	Zip Code <b>53072</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.122147**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOAN C FISCHER**

Mailing Address **21 COUSTEAU LN**

City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78746</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122149**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL FISHBEIN**

Mailing Address **4809 PRESERVE PARKWAY**

City <b>LONG GROVE</b>	State <b>IL</b>	Zip Code <b>60047</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BECSPACK INC**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.122151**

Date of Receipt

**07 / 02 / 2015**

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4350.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH FISHBEIN**

Mailing Address 2584 CHEDWORTH CT

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.122153**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

3000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH FISHBEIN**

Mailing Address 2584 CHEDWORTH CT

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122154**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH FISHBEIN**

Mailing Address 2584 CHEDWORTH CT

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.122155**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK I FISHBEIN**

Mailing Address 2700 SUMMIT DR

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHILDRENS MEMORIAL HOSPITAL

Occupation

DOCTOR

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122157**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BLAKE FISHER**

Mailing Address 12 CASTLE PINES DR N

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122159**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J. M FISHER**

Mailing Address 15 BAYSIDE DRIVE

City

MADISON

State

WI

Zip Code

53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122161**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JILL FITZGERALD**

Mailing Address 486 MUREX DR

City  
NAPLES

State Zip Code  
FL 34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122162**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH FITZGERALD**

Mailing Address 9514 HAMMONTREE DRIVE

City  
URBAN DALE

State Zip Code  
IA 50322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.122164**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GRAYSON FITZHUGH**

Mailing Address 6921 GLEN ELLYN DR

City  
LOVELAND

State Zip Code  
OH 45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122166**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 27 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

975.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 541 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DYANA FLANIGAN**

Mailing Address 533 W MELROSE

City	State	Zip Code
CHICAGO	IL	60057

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122168**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN FLATLEY**

Mailing Address 7 ARROWHEAD LANE

City	State	Zip Code
MILTON	MA	02186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122170**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN FLATLEY**

Mailing Address 7 ARROWHEAD LANE

City	State	Zip Code
MILTON	MA	02186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122170.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5650.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN FLATLEY**

Mailing Address **7 ARROWHEAD LANE**

City	State	Zip Code
MILTON	MA	02186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122170.1**

Date of Receipt

**09 / 14 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD G FLECK**

Mailing Address **13910 STIMMEL ST NE**

City	State	Zip Code
PARIS	OH	44669

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122171**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD G FLECK**

Mailing Address **13910 STIMMEL ST NE**

City	State	Zip Code
PARIS	OH	44669

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00**

**Transaction ID : SA17A.122172**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFFREY FLEETHAM**

Mailing Address 4308 E PINCHOT AVE

City	State	Zip Code
PHOENIX	AZ	85018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ARIZONA REGISTRAR OF CONTRACTORS

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122174**

Date of Receipt

**07** / **19** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY FLEETHAM**

Mailing Address 4308 E PINCHOT AVE

City	State	Zip Code
PHOENIX	AZ	85018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ARIZONA REGISTRAR OF CONTRACTORS

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122175**

Date of Receipt

**08** / **01** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK FLEISCHHACKER**

Mailing Address 3530 STEELE ST

City	State	Zip Code
MINNETONKA	MN	55345

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LAKE REGION MEDICAL

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122177**

Date of Receipt

**07** / **14** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANN FLENTJE**

Mailing Address 47 MYSTIC STREET, 7A

City	State	Zip Code
ARLINGTON	MA	02474

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122179**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD F FLETCHER**

Mailing Address 6503 ARROYO DEL OSO,NE

City	State	Zip Code
ALBUQUERQUE	NM	87109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122180**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD F FLETCHER**

Mailing Address 6503 ARROYO DEL OSO,NE

City	State	Zip Code
ALBUQUERQUE	NM	87109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.122181**

Date of Receipt

**08 / 02 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD F FLETCHER**

Mailing Address **6503 ARROYO DEL OSO,NE**

City	State	Zip Code
ALBUQUERQUE	NM	87109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**700.00**

**Transaction ID : SA17A.122182**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT FLOCK**

Mailing Address **146 POWELL ROAD**

City	State	Zip Code
ALLENDALE	NJ	07401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122184**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT FLOCK**

Mailing Address **1221 MASSACHUSETTS AVENUE, NW, APT**

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122186**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARRY M FLOETER**

Mailing Address **347 E STEVENS ST**

City	State	Zip Code
COOKEVILLE	TN	38501

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CHC MECHANICAL CONTRACTORS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122188**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOAN FLOOD**

Mailing Address **110 FOREST GTWY**

City	State	Zip Code
CRYSTAL FALLS	MI	49920

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122190**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN FLOOD**

Mailing Address **143 GODFREY DR**

City	State	Zip Code
NORTON	MA	02766

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122192**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARYANN FLOOD**

Mailing Address 17401 SE 39TH ST

City

VANCOUVER

State

WA

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122194**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARYANN FLOOD**

Mailing Address 17401 SE 39TH ST

City

VANCOUVER

State

WA

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122195**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL FLOOD**

Mailing Address 18 DERBY BROOK WAY

City

HINGHAM

State

MA

Zip Code

02043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW ENGLAND BUILDING SUPPLY

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122197**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

**Total This Period** (last page this line number only) .....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****RICHARD H FLORANCE**

Mailing Address 3414 W WALLCRAFT AVE

City	State	Zip Code
TAMPA	FL	33611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122198**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****RICHARD H FLORANCE**

Mailing Address 3414 W WALLCRAFT AVE

City	State	Zip Code
TAMPA	FL	33611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122199**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****ROBERT FLORINE**

Mailing Address 1863 EASTMAN AVENUE

City	State	Zip Code
VENTURA	CA	93003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARP INC.Occupation  
MANUFACTURER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.122200**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID FLORY**

Mailing Address 50 S.  
2

City State Zip Code  
MIAMI BEACH FL 33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122202**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROCKNE G FLOWERS**

Mailing Address 726 HURON HL

City State Zip Code  
MADISON WI 53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122204**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYMOND FLOYD**

Mailing Address 11910 PALMA DRIVE

City State Zip Code  
PALM BEACH GARDENS FL 33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122206**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

GEORGE FLUME

Mailing Address 3208 MEADOW RUN DR

City	State	Zip Code
VENICE	FL	34293

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.122208

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

BARBARA FLUTIE

Mailing Address 5330 SW 14TH ST

City	State	Zip Code
PLANTATION	FL	33317

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ADMINISTRATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.122210

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

ROSALEE FOGARTY

Mailing Address 5660 ALPINE ROAD

City	State	Zip Code
PORTOLA VALLEY	CA	94028

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.122211

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ARTHUR FOKAKIS**

Mailing Address 120 WILDWOOD TRACE

City	State	Zip Code
HATTIESBURG	MS	39402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
ASTHMA AND ALLERGY CLINIC OF HATTIES	PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.122212**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		08		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL FOLEY**

Mailing Address 608 CLINTON PLACE

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122214**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HOWARD FOLEY**

Mailing Address 2536 NW SEAGRASS DR

City	State	Zip Code
PALM CITY	FL	34990

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122216**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS FOLK**

Mailing Address 2202 LILY DR

City  
**RUSTON**

State Zip Code  
**LA 71270**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.122218**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BERNICE FOLLETT**

Mailing Address 5600 CRAGGY POINT

City  
**AUSTIN**

State Zip Code  
**TX 78731**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128742**

Date of Receipt

**06 / 30 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN FOLLETT**

Mailing Address 5600 CRAGGY POINT

City  
**AUSTIN**

State Zip Code  
**TX 78731**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122220**

Date of Receipt

**06 / 30 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**7400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN FOLLETT**

Mailing Address 5600 CRAGGY POINT

City	State	Zip Code
AUSTIN	TX	78731

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128740**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLORIA K FOLSOM**

Mailing Address 1329 CURT GOWDY DR

City	State	Zip Code
CHEYENNE	WY	82009

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122222**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN D FOLWELL**

Mailing Address 1802 THILENIUS STREET

City	State	Zip Code
CAPE CIRARDEAU	MO	63701

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122223**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**VINCENT W FONTI**

Mailing Address **1816 BUCKHORN RD**

City <b>ARBOR VITAE</b>	State <b>WI</b>	Zip Code <b>54568</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122225**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BOB FOOTE**

Mailing Address **S45W27721 ELK VALLEY RO**

City <b>WAUKESHA</b>	State <b>WI</b>	Zip Code <b>53189</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122227**

Date of Receipt

**08 / 19 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES E FORD**

Mailing Address **426 S. 1000 E. #800**

City <b>SALT LAKE CITY</b>	State <b>UT</b>	Zip Code <b>84102</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122229**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 555 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEVIN C FORD**

Mailing Address PO BOX 550229

City

ATLANTA

State

GA

Zip Code

30355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATTORNEY

Occupation

LAW OFFICE OF KEVIN FORD

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122231**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN C FORD**

Mailing Address PO BOX 550229

City

ATLANTA

State

GA

Zip Code

30355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATTORNEY

Occupation

LAW OFFICE OF KEVIN FORD

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122232**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEVIN C FORD**

Mailing Address PO BOX 550229

City

ATLANTA

State

GA

Zip Code

30355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATTORNEY

Occupation

LAW OFFICE OF KEVIN FORD

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122233**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 20 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 556 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDSEY FORD**

Mailing Address 4610 WINDSOR GATE CT

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RHEEM**

Occupation  
**PUBLIC RELATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122235**

Date of Receipt

**06 / 30 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHILIP D FORD**

Mailing Address 8206 SILK TREE WAY

City	State	Zip Code
ANTELOPE	CA	95843

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.00

**Transaction ID : SA17A.122236**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

175.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STUART FORD**

Mailing Address 10521 W 600 S

City	State	Zip Code
REDKEY	IN	47373

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122238**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

425.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 557 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DARREL FORSLUND**

Mailing Address 1915 W 4TH STREET

City	State	Zip Code
SPENCER	IA	51301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.122239**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

110.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUAN FORSTER**

Mailing Address 12245 CIRCULA PANORA

City	State	Zip Code
SANTA ANA	CA	92705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122241**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYMOND FORTUNA**

Mailing Address 6934 DEER RUN DR

City	State	Zip Code
ALEXANDRIA	VA	22306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122243**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1110.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 558 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**THEODORE FOSDICK**

Mailing Address 5741 JACKSON RD

City	State	Zip Code
ANN ARBOR	MI	48103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PITTSFIELD PRODUCTS INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122245**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS A FOSS**

Mailing Address 8751 PARKWAY DRIVE

City	State	Zip Code
HIGHLAND	IN	46322

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

**Transaction ID : SA17A.122247**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS A FOSS**

Mailing Address 8751 PARKWAY DRIVE

City	State	Zip Code
HIGHLAND	IN	46322

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.122248**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3450.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 559 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS A FOSS**

Mailing Address 8751 PARKWAY DRIVE

City	State	Zip Code
HIGHLAND	IN	46322

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122248.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS A FOSS**

Mailing Address 8751 PARKWAY DRIVE

City	State	Zip Code
HIGHLAND	IN	46322

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.122248.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/8/2015

Amount of Each Receipt this Period

500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDSON FOSTER**

Mailing Address 130 S. WATER ST., UNIT 403

City	State	Zip Code
MILWAUKEE	WI	53204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122250**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 560 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDSON FOSTER**

Mailing Address 130 S. WATER ST., UNIT 403

City	State	Zip Code
MILWAUKEE	WI	53204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122251**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANE A FOSTER**

Mailing Address 421 SQUAM LAKE ROAD

City	State	Zip Code
CENTER SANDWI	NH	03227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122252**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANE A FOSTER**

Mailing Address 421 SQUAM LAKE ROAD

City	State	Zip Code
CENTER SANDWI	NH	03227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122253**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 561 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE A FOSTER**

Mailing Address 421 SQUAM LAKE ROAD

City	State	Zip Code
CENTER SANDWI	NH	03227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.122254**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOE B FOSTER**

Mailing Address 10000 MEMORIAL DRIVE, #

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PETROLEUM ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122256**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KARLA FOSTER**

Mailing Address 2704 CURRIETON CT.

City	State	Zip Code
OAK RIDGE	NC	27310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122258**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**LARRY FOSTER**

Mailing Address 16733 VILLAGE LN

City	State	Zip Code
DALLAS	TX	75248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122260**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LEONARD FOSTER**

Mailing Address 1316 GRINNELL DR

City	State	Zip Code
RICHARDSON	TX	75081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

370.00

**Transaction ID : SA17A.122261**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

180.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LEONARD FOSTER**

Mailing Address 1316 GRINNELL DR

City	State	Zip Code
RICHARDSON	TX	75081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

**Transaction ID : SA17A.122262**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

40.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

720.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 563 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LEONARD FOSTER**

Mailing Address 1316 GRINNELL DR

City	State	Zip Code
RICHARDSON	TX	75081

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

460.00

**Transaction ID : SA17A.122263**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD FOSTER**

Mailing Address 3719 N BURTON LANE

City	State	Zip Code
HUDSON	OH	44236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122265**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT R FOSTER**

Mailing Address 917 N WEMAR WAY

City	State	Zip Code
MONTEBELLO	CA	90640

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122267**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 564 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT FOSTER**

Mailing Address 18412 PIERCE CIRCLE

City	State	Zip Code
OMAHA	NE	68130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
COMPUTERS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122269**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOM FOSTER**

Mailing Address 1017 SUSSEX DR

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
WRITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122271**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT FOUST**

Mailing Address 322 W PICCADILLY ST

City	State	Zip Code
WINCHESTER	VA	22601

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINCHESTER RADIOLOGISTS PC

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122273**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 565 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES FOX**

Mailing Address 5615 NEBRASKA AVENUE NW

City	State	Zip Code
WASHINGTON	DC	20015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FOX & ASSOCIATES**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122275**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY ANN FOXLEY**

Mailing Address 5923 BENDER COURT  
B

City	State	Zip Code
BURLINGTON	WI	00000

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122277**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD FRAHM**

Mailing Address 7 AVENUE DE LA MER APT.

City	State	Zip Code
PALM COAST	FL	32137

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122279**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 566 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WAYNE FRANCIS RASMUSSEN**

Mailing Address 1004 CARLSBAD DRIVE

City	State	Zip Code
ALLEN	TX	75002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122281**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN FRANCO**

Mailing Address 524 METAIRIE ROAD

City	State	Zip Code
METAIRIE	LA	70005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122283**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DIANE FRANCO**

Mailing Address 524 METAIRIE ROAD

City	State	Zip Code
METAIRIE	LA	70005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122285**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 567 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LLOYD FRANK**

Mailing Address 7505 EAST ROCKTON ROAD

City	State	Zip Code
ROSCOE	IL	61073

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122287**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGIE FRANK**

Mailing Address 6429 PEMBERTON DR

City	State	Zip Code
DALLAS	TX	75230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122289**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RON FRANK**

Mailing Address 13134 CARTER RD.

City	State	Zip Code
PAINESVILLE	OH	44077

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MARANATHA SOFTWARE, INC.

Occupation  
SOFTWARE DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122291**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 568 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EMMA FRANKLIN**

Mailing Address **27 N HILLSIDE AVENUE**

City	State	Zip Code
CHATHAM	NJ	07928

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122293**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT D FRANKS JR.**

Mailing Address **504 SOUTHFIELD ROAD**

City	State	Zip Code
SHREVEPORT	LA	71106

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122295**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTHA FRANSSON**

Mailing Address **11 DODGE DRIVE**

City	State	Zip Code
WEST HARTFORD	CT	06107

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122297**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 569 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARTHA FRANSSON**

Mailing Address 11 DODGE DRIVE

City	State	Zip Code
WEST HARTFORD	CT	06107

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122298**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAY A FRANZ**

Mailing Address PO BOX 42

City	State	Zip Code
ONEKAMA	MI	49675

FEC ID number of contributing federal political committee.

C

Name of Employer  
MICHIGAN HOUSE OF REPRESENTA

Occupation  
STATE REPRESENTATIVE DIS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122300**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED T FRANZIA**

Mailing Address PO BOX 789

City	State	Zip Code
CERES	CA	95307

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122302**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 570 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELLEN L FRAZER**

Mailing Address 2081 S TRIANGLE X LN

City	State	Zip Code
TUCSON	AZ	85713

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122304**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NATALIE FREDRICKSO**

Mailing Address 2557 LANCER PL

City	State	Zip Code
WALLA WALLA	WA	99362

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122305**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPHIN FREEDE**

Mailing Address 316 NW 39TH ST

City	State	Zip Code
OKLAHOMA CITY	OK	73118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.122307**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 571 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GINA FREELS**

Mailing Address 2025 CIRCLE DRIVE

City	State	Zip Code
KRONENWETTER	WI	54455

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122309**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CONRAD J FREEMAN**

Mailing Address 5405 E KNOLL PLACE

City	State	Zip Code
HIGHLANDS RANCH	CO	80130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.122311**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LISA FREER**

Mailing Address 2024 ASHBOURNE DRIVE

City	State	Zip Code
SOUTH PASADENA	CA	91030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122313**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

720.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 572 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NORMAN FREIDKIN**

Mailing Address 11819 PINEY GLEN LN

City	State	Zip Code
POTOMAC	MD	20854

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122315**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID FRENCH**

Mailing Address 144 EXETER RD

City	State	Zip Code
HAMPTON FALLS	NH	03844

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122316**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID FRENCH**

Mailing Address 144 EXETER RD

City	State	Zip Code
HAMPTON FALLS	NH	03844

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.122317**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 573 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARCIA FRENCH**

Mailing Address **27 VALLEY RIDGE RD**

City	State	Zip Code
FORT WORTH	TX	76107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122319**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARDYTH FRESHMAN**

Mailing Address **6151 WEST CENTURY BOULE**

City	State	Zip Code
LOS ANGELES	CA	90045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Homemaker**

Occupation  
**Homemaker**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122321**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SAMUEL K FRESHMAN**

Mailing Address **6151 W CENTURY BOULEVAR**

City	State	Zip Code
LOS ANGELES	CA	90045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STANDARD MANAGEMENT COMPANY**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122323**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**8100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 574 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SAMUEL K FRESHMAN**

Mailing Address **6151 W CENTURY BOULEVAR**

City	State	Zip Code
LOS ANGELES	CA	90045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STANDARD MANAGEMENT COMPANY**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122324**

Date of Receipt

**08 / 25 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN FREY**

Mailing Address **1801 ROCKDALE INDUST**

City	State	Zip Code
CONYERS	GA	30012

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FREY-MOSS STRUCTURES**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122326**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DON FREYMILLER**

Mailing Address **8125 SW 15TH ST**

City	State	Zip Code
OKLAHOMA CITY	OK	73128

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122328**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 575 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN FREZZA**

Mailing Address 212 W KEY PALM RD

City	State	Zip Code
BOCA RATON	FL	33432

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122330**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUSTO FRIAS**

Mailing Address 49 CONTRADA FIORE DR

City	State	Zip Code
HENDERSON	NV	89011

FEC ID number of contributing federal political committee.

C

Name of Employer  
NEXOS CAPITAL

Occupation  
PRIVATE EQUITY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122332**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRAD FRICKS**

Mailing Address 602 BENDWOOD

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing federal political committee.

C

Name of Employer  
STREAM REALTY

Occupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122334**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 576 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LOUIS FRIEDRICH**

Mailing Address **188 E 78TH ST**  
**P**

City State Zip Code  
**NEW YORK NY 10075**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122336**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRAN C FRIGO**

Mailing Address **1245 OUTWARD AVE**

City State Zip Code  
**DE PERE WI 54115**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122338**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDITH FROHBOESE**

Mailing Address **6719 LOCKSLEY LN**

City State Zip Code  
**CEDARBURG WI 53012**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122342**

Date of Receipt

**06 / 30 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 577 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN FRONING**

Mailing Address 4044 LONE WOLF CIR

City	State	Zip Code
CROSSVILLE	TN	38572

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.122343**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN FRONING**

Mailing Address 4044 LONE WOLF CIR

City	State	Zip Code
CROSSVILLE	TN	38572

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.122344**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN FRONING**

Mailing Address 4044 LONE WOLF CIR

City	State	Zip Code
CROSSVILLE	TN	38572

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.122345**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		29		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

225.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 578 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN FRONING**

Mailing Address 4044 LONE WOLF CIR

City	State	Zip Code
CROSSVILLE	TN	38572

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

485.00

**Transaction ID : SA17A.122346**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

110.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALBERT FROWISS**

Mailing Address PO BOX 909

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122348**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GERALD FRYE**

Mailing Address 940 MADERA CIR

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BENEFIT SERVICES GROUP, INC.

Occupation  
EMPLOYEE BENEFIT CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122350**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1610.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 579 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NATALIE FRYE**

Mailing Address 940 MADERA CIR

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122352**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			06			2015			

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NATALIE FRYE**

Mailing Address 940 MADERA CIR

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122353**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			06			2015			

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN FUGELSANG**

Mailing Address 20 LONG BOW

City	State	Zip Code
WADING RIVER	NY	11792

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DEPARTMENT OF DEFENSE

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122355**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			01			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRANK FUHRER**

Mailing Address 3100 E CARSON STREET

City	State	Zip Code
PITTSBURGH	PA	15203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FRANK FUHRER HOLDINGS**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122357**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANK FUHRER**

Mailing Address 3100 E CARSON STREET

City	State	Zip Code
PITTSBURGH	PA	15203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FRANK FUHRER HOLDINGS**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128910**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HEIDI FUHRER**

Mailing Address 3100 E CARSON STREET

City	State	Zip Code
PITTSBURGH	PA	15203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128912**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLAYTON S FULLER**

Mailing Address 860 CREST RD

City	State	Zip Code
DEL MAR	CA	92014

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHULA VISTA ORTHODONTICS

Occupation  
ORTHODIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.122359**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHLEEN FULLER**

Mailing Address 6137 FOREST LN

City	State	Zip Code
SYKESVILLE	MD	21784

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122361**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMY J FULLERTON**

Mailing Address 307 GRANDEUR OAKS COURT

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122363**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES FULLMER**

Mailing Address 2552 WALNUT AVENUE, SUITE 230

City	State	Zip Code
TUSTIN	CA	92780

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Fuller Construction

Occupation  
General Contractor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122365**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STANLEY E FULTON**

Mailing Address 5738 HEDGEHAVEN CT

City	State	Zip Code
LAS VEGAS	NV	89120

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128812**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2015			

REATTRIBUTION REQUESTED

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STANLEY E FULTON**

Mailing Address 5738 HEDGEHAVEN CT

City	State	Zip Code
LAS VEGAS	NV	89120

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122367**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			27			2015			

REATTRIBUTION REQUESTED

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN FURBUSH**

Mailing Address 45 ORRILLS HILL RD

City	State	Zip Code
LEBANON	ME	04027

FEC ID number of contributing federal political committee.

C

Name of Employer  
TCS

Occupation  
PROJECT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122369**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE FUREY**

Mailing Address 4775 IMPERIAL DR.

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122371**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KATHLEEN FUTRELL**

Mailing Address 1723 COUNTRY WAY

City	State	Zip Code
GAINESVILLE	GA	30501

FEC ID number of contributing federal political committee.

C

Name of Employer  
WILLIS INVESTMENT COUNSEL

Occupation  
FIRM ADMINISTRATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122372**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 584 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL GABLER**

Mailing Address **N7949 STATE PARK RD**

City	State	Zip Code
MENASHA	WI	54952

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MJ GABLER, DDS**

Occupation  
**DENTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122374**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAGGIE GAGE**

Mailing Address **PO BOX 220**

City	State	Zip Code
WILLIAMS BAY	WI	53191

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122376**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SANDRA E GALE**

Mailing Address **945 GREEN STREET #9**

City	State	Zip Code
SAN FRANCISCO	CA	94133

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122380**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAIGE AND TOM GALFANO**

Mailing Address 17870 CAPTAINS CT

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEDICAL AESTHETICS MARKETING

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122382**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT GALKIN**

Mailing Address 110 ELSIE ST

City	State	Zip Code
CRANSTON	RI	02910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122383**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN GALLAGHER**

Mailing Address 4056 PONCEDELEON

City	State	Zip Code
ONEIDA	WI	54155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122385**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN GALLAGHER**

Mailing Address 804 MOORE DRIVE

City	State	Zip Code
BELLEVUE	NE	68005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CREIGHTON UNIVERSITY

Occupation  
TEACHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122387**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD GALLO**

Mailing Address 98 SUTTON CIR APT 904

City	State	Zip Code
RAINBOW CITY	AL	35906

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ANESTHESIA ASSOCIATES OF NE  
ALABAMA

Occupation  
ANESTHESIOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122391**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTIN GALLUN**

Mailing Address 31010 CHEQUAMEGON DR.

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
METALCRAFT OF MAYVILLE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122393**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 587 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH GAMBLE**

Mailing Address **175 HUGUENOT ST**  
**PH501**

City **NEW ROCHELLE** State **NY** Zip Code **10801**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INSURANCE BROKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122395**

Date of Receipt

**06 / 25 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**IVAN GAMBOA**

Mailing Address **5680 GARLAND LANE**

City **GREENDALE** State **WI** Zip Code **53129**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Tri City National Bank**

Occupation  
**Senior VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122397**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GUILLERM GARCIA**

Mailing Address **9401 SW 103RD ST**

City **MIAMI** State **FL** Zip Code **33176**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122398**

Date of Receipt

**07 / 26 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 588 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GUILLERM GARCIA**

Mailing Address 9401 SW 103RD ST

City	State	Zip Code
MIAMI	FL	33176

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.122399**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GUILLERM GARCIA**

Mailing Address 9401 SW 103RD ST

City	State	Zip Code
MIAMI	FL	33176

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122400**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THERESA GARCIA**

Mailing Address 653 D ROAD

City	State	Zip Code
COLUMBIA	IL	62236

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
HOST CHRISTIAN TV SHOW

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122402**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT GARDINER**

Mailing Address **47 LAKE RD**

City State Zip Code  
**FAR HILLS NJ 07931**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.122404**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WAYNE GARDNER**

Mailing Address **7502 STATE HIGHWAY 13**

City State Zip Code  
**PITTSVILLE WI 54466**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GARDNER CRANBER**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.122406**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WAYNE GARDNER**

Mailing Address **7502 STATE HIGHWAY 13**

City State Zip Code  
**PITTSVILLE WI 54466**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GARDNER CRANBER**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122407**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**7400.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROSEMARY A GARMANN**

Mailing Address 5349 JULMAR DR

City	State	Zip Code
CINCINNATI	OH	45238

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122408**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROSEMARY A GARMANN**

Mailing Address 5349 JULMAR DR

City	State	Zip Code
CINCINNATI	OH	45238

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122409**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROSEMARY A GARMANN**

Mailing Address 5349 JULMAR DR

City	State	Zip Code
CINCINNATI	OH	45238

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122410**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL GARNER**

Mailing Address 623 PARK HILL RD

City	State	Zip Code
DANVILLE	CA	94526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

**Transaction ID : SA17A.122411**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHIRLEY A GARNESS**

Mailing Address 2614 SPRUCEWOOD STREET

City	State	Zip Code
ANCHORAGE	AK	99508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EMPLOYED

Occupation  
Accounting

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122413**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ADAM GARNICA**

Mailing Address 2137 COLTS NECK COURT

City	State	Zip Code
RESTON	VA	20191

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept Of Defense

Occupation  
Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122415**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**C L GARRETT**

Mailing Address 3516 NW 69TH ST

City	State	Zip Code
OKLAHOMA CITY	OK	73116

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122417**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARTIN GARRICK**

Mailing Address PO BOX 2582

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ADMIRAL PROPERTY COMPANY

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122419**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN GARST**

Mailing Address 3008 DEL PRADO

City	State	Zip Code
ALAMOGORDO	NM	88310

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122420**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT W GARTHWAIT**

Mailing Address PO BOX 1367

City	State	Zip Code
WATERBURY	CT	06721

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CLY & DEL MFG CO

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122422**

Date of Receipt

**07** / **20** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHILIP GARTON**

Mailing Address 4962 HIGHWOOD CIRCLE

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SPRINGS WINDOW FASHIONS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122424**

Date of Receipt

**07** / **17** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PHILIP GARTON**

Mailing Address 4962 HIGHWOOD CIRCLE

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SPRINGS WINDOW FASHIONS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122425**

Date of Receipt

**08** / **07** / **2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENIFER GARVEY**

Mailing Address 4721 ANNAWAY DRIVE

City	State	Zip Code
EDINA	MN	55436

FEC ID number of contributing federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122427**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN GASSER**

Mailing Address 5595 LAWTON AVE

City	State	Zip Code
OAKLAND	CA	94618

FEC ID number of contributing federal political committee.

C

Name of Employer  
ADOLPH GASSER INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.122428**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN GASSER**

Mailing Address 5595 LAWTON AVE

City	State	Zip Code
OAKLAND	CA	94618

FEC ID number of contributing federal political committee.

C

Name of Employer  
ADOLPH GASSER INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.122429**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

375.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN GASSER**

Mailing Address 5595 LAWTON AVE

City	State	Zip Code
OAKLAND	CA	94618

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ADOLPH GASSER INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

**Transaction ID : SA17A.122430**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRYAN GAULT**

Mailing Address 1422 PRINCETON COURT

City	State	Zip Code
ALLENTOWN	PA	18104

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122431**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMIT GAURI**

Mailing Address 4889 N HERMITAGE AVE

City	State	Zip Code
CHICAGO	IL	60640

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BLACK DOG

Occupation  
FOUNDER/OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122433**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL J GAVINSKI**

Mailing Address PO BOX 117

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WISCONSIN DUCK TOURS

Occupation  
TOUR GUIDE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122435**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CYNTHIA GAYDEN**

Mailing Address 6230 DELOACHE AVE

City	State	Zip Code
DALLAS	TX	75225

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122437**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TROY GAYESKI**

Mailing Address 853 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Sky Bridge

Occupation  
Finance

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.122378**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

14500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TROY GAYESKI**

Mailing Address 853 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Sky Bridge

Occupation  
Finance

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122378.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REATTRIBUTION TO JENNIFER HADA

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JENNIFER HADA**

Mailing Address 350 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122378.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REATTRIBUTION FROM TROY GAYESKI; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JENNIFER HADA**

Mailing Address 350 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122378.2**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENNIFER HADA**

Mailing Address 350 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122378.3**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TROY GAYESKI**

Mailing Address 853 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Sky Bridge

Occupation  
Finance

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122378.4**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TROY GAYESKI**

Mailing Address 853 CEDAR LANE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Sky Bridge

Occupation  
Finance

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122378.5**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MS. MARILYN V GEARHART**

Mailing Address P.O. BOX 427

City	State	Zip Code
WATERVILLE	WA	98858

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122439**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL GEHL**

Mailing Address PO BOX 303

City	State	Zip Code
HILBERT	WI	54129

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122441**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL O GEHL**

Mailing Address PO BOX 303

City	State	Zip Code
HILBERT	WI	54129

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122443**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 600 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL O GEHL**

Mailing Address **PO BOX 303**

City <b>HILBERT</b>	State <b>WI</b>	Zip Code <b>54129</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122444**

Date of Receipt

**07 / 22 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH GEHRING**

Mailing Address **2759 HOPE RD**

City <b>COTTAGE GROVE</b>	State <b>WI</b>	Zip Code <b>53527</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THERMA STO LLC**

Occupation  
**RESEACHER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122446**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARLENE GEISER**

Mailing Address **PO BOX 744**

City <b>SPRINGVILLE</b>	State <b>UT</b>	Zip Code <b>84663</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**LIFE STYLE AND NUTRITION CONSULT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122447**

Date of Receipt

**09 / 05 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 601 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS A GELDERMANN**

Mailing Address **N1639 WILLOW BROOK R**

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122449**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES J GELHAAR**

Mailing Address **5603 BRAMBLEWOOD RD**

City	State	Zip Code
LA CANADA	CA	91011

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PUBLIC WORKS & TRAFFIC COMMI**

Occupation  
**COMMISSIONER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122451**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK GELHAUS**

Mailing Address **4658 WEST 5 MILE ROAD**

City	State	Zip Code
CALEDONIA	WI	53108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Clifton Larson Allen LLP**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122453**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 602 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL GENTRY**

Mailing Address 1855 N 600 W

City State Zip Code  
LEBANON IN 46052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MARK IT RED LLC

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122457**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**W. PEYTON GEORGE**

Mailing Address 907 OLD SANTA FE TRAIL

City State Zip Code  
SANTA FE NM 87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122459**

Date of Receipt

M M / D D / Y Y Y Y  
06 24 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WAYNE A GERTH**

Mailing Address N5845 COUNTY ROAD EAST

City State Zip Code  
IRON RIDGE WI 53035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122461**

Date of Receipt

M M / D D / Y Y Y Y  
07 21 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 603 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD GESCHIMSKY**

Mailing Address 173 GRANDVIEW AVENUE

City	State	Zip Code
BERLIN	CT	06037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.122463**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT GETTEMY**

Mailing Address 3325 JONQUIL LN

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TAXACT

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122465**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERT GETZ**

Mailing Address 6335 W HIGHWAY 120

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122467**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1220.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 604 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID W GHEGAN**

Mailing Address 4347 SENTINEL POST R

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TROATMAN SANDERS LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122469**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN GHETTI**

Mailing Address 3500 DELTA DR

City	State	Zip Code
SAINT GABRIEL	LA	70776

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FINFOAM**

Occupation  
**VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122471**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANN D GIBBS**

Mailing Address 5005 YACHT CLUB RD

City	State	Zip Code
JACKSONVILLE	FL	32210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122473**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1250.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PHYLIS GIBBS**

Mailing Address 7121 W BROOKOVER DR APT

City	State	Zip Code
BOISE	ID	83709

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122475**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CATHY A GIBSON**

Mailing Address 4886 MOTIF ST

City	State	Zip Code
OCEANSIDE	CA	92057

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NOVA VOICE & DATA SYSTEMS INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122477**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED D. GIBSON**

Mailing Address 3204 PLAZA DE RAFAEL

City	State	Zip Code
LAS VEGAS	NV	89102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128992**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

9100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED D. GIBSON**

Mailing Address 3204 PLAZA DE RAFAEL

City	State	Zip Code
LAS VEGAS	NV	89102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128992.0**

Date of Receipt

**09 / 18 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED D. GIBSON**

Mailing Address 3204 PLAZA DE RAFAEL

City	State	Zip Code
LAS VEGAS	NV	89102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128992.1**

Date of Receipt

**09 / 18 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BENJAMIN GIELOW**

Mailing Address 2405 CHURCHILL ROAD

City	State	Zip Code
SILVER SPRING	MD	20902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AMAZON

Occupation  
LOBBYIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122479**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 607 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BENJAMIN GIELOW**

Mailing Address 2405 CHURCHILL ROAD

City	State	Zip Code
SILVER SPRING	MD	20902

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMAZON

Occupation  
LOBBYIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122480**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAYMOND E GIERINGER**

Mailing Address 2618 SHOREHAVEN LN

City	State	Zip Code
OSHKOSH	WI	54904

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.122481**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES GIESE**

Mailing Address 400 VILLA ST

City	State	Zip Code
DUBUQUE	IA	52003

FEC ID number of contributing federal political committee.

C

Name of Employer  
GIESE MANUFACTURING CO.

Occupation  
PRESIDENT/OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122483**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 608 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**YALE GIESZL**

Mailing Address PO BOX 6535

City State Zip Code  
SNOWMASS VILL CO 81615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122484**

Date of Receipt

M M / D D / Y Y Y Y  
07 21 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEANNE T GIGANTE**

Mailing Address PO BOX 440

City State Zip Code  
WAUSAUKEE WI 54177

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WAUPACA FOUNDRY INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122486**

Date of Receipt

M M / D D / Y Y Y Y  
07 22 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AUSTIN GILBERT**

Mailing Address POB 3009

City State Zip Code  
FLORENCE SC 29502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GILBERT CONSTRUCTION CO.

Occupation  
BUILDING CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

232.00

**Transaction ID : SA17A.122487**

Date of Receipt

M M / D D / Y Y Y Y  
08 14 2015

Amount of Each Receipt this Period

82.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3032.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AMY GILES-MAURER**

Mailing Address 257 OLD GREEN BAY ROAD

City	State	Zip Code
KENOSHA	WI	53144

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TG3 ELECTRONICS, INC

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122489**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN GILL**

Mailing Address 5000 N SHORELINE TERRACE

City	State	Zip Code
MUNCIE	IN	47304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GILL BROTHERS FURNITURE

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122491**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARVIN GILLIAM**

Mailing Address 16104 COLLETON COURT

City	State	Zip Code
BRISTOL	VA	24202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122493**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET GILLIS**

Mailing Address 322 MAYFIELD AVE

City	State	Zip Code
ELKINS PARK	PA	19027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.122495**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES GILLY**

Mailing Address PO BOX 2239

City	State	Zip Code
PONTE VEDRA	FL	32004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GILLY DEVELOPMENT CORP

Occupation  
WIRELESS TELECOM

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122497**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL GILMOUR**

Mailing Address 87 WESTMONT ST.

City	State	Zip Code
WEST HARTFORD	CT	06117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CANTOR COLBURN LLP

Occupation  
PATENT AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122499**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS GILSTAD**

Mailing Address 9940 SW PEACE RIVER STREET

City	State	Zip Code
ARCADIA	FL	34269

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122501**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIAN GINGOLD**

Mailing Address 300 E 56TH ST

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UBS FINANCIAL

Occupation  
SR. VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122503**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERIC GITTER**

Mailing Address 3140 HUBERTUS ROAD

City	State	Zip Code
HUBETUS	WI	53033

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122505**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALFRED R GLANCY**

Mailing Address 40 PRESTON PLACE

City	State	Zip Code
GROSSE POINTE	MI	48238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122507**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH GLASS**

Mailing Address 28 PEACH KNOB DR

City	State	Zip Code
ASHEVILLE	NC	28804

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STONY POINT GROUP

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122509**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN GLEESON**

Mailing Address 412 N HICKORY AV

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122511**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MILDRED ANN GLENDINNING**

Mailing Address 318 S.BEACH RD.

City	State	Zip Code
HOBE SOUND	FL	33455

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122512**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MILDRED ANN GLENDINNING**

Mailing Address 318 S.BEACH RD.

City	State	Zip Code
HOBE SOUND	FL	33455

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122513**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MILDRED ANN GLENDINNING**

Mailing Address 318 S.BEACH RD.

City	State	Zip Code
HOBE SOUND	FL	33455

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.122514**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

350.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRONWYN P GLOJEK**

Mailing Address **W238N3251 HIGH MEADO**

City <b>PEWAUKEE</b>	State <b>WI</b>	Zip Code <b>53072</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122516**

Date of Receipt

**07 / 06 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK GLORIOD**

Mailing Address **752 SILVER OAK GROVE**

City <b>COLORADO SPRINGS</b>	State <b>CO</b>	Zip Code <b>80906</b>
---------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REALTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122518**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARRY GLOVER**

Mailing Address **1319 COSSACKS PL**

City <b>GLENDORA</b>	State <b>CA</b>	Zip Code <b>91741</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122519**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN GLYNN**

Mailing Address 4141 SLEEPING DRAGON ROAD

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GUY & O'NEILL, INC

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122520**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS GNAS**

Mailing Address 7309 BIRDCHERRY LANE

City	State	Zip Code
LAUREL	MD	20707

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122522**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KRISTIE GOBEN**

Mailing Address 1601 E JUNIPER WAY

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GREATER MILWAUKEE AUTO AUCTION

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122524**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES H GODDARD**

Mailing Address **143 1ST STREET**

City State Zip Code  
**MENOMINEE MI 49858**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MARINETTE MARINE CORPORATION**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122526**

Date of Receipt

**08 / 26 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN GODDARD**

Mailing Address **PO BOX 15550**

City State Zip Code  
**LOVES PARK IL 61132**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Investment Resources Corp**

Occupation  
**Manager**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122528**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RONALD GODDARD**

Mailing Address **13507 SR 70 W**

City State Zip Code  
**LAKE PLACID FL 33852**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RANCHER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122530**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1750.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 617 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHRYN GODLEY**

Mailing Address PO BOX 1208

City

DAVIDSON

State

NC

Zip Code

28036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE INVESTMENT

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122532**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD GOEAS**

Mailing Address 201 NORTH UNION STREET, SUITE 410

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE TARRANCE GROUP

Occupation

SURVEY RESEARCH

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122533**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 27 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUE Z. GOEBEL**

Mailing Address 8467 SAND POINT WAY

City

INDIANAPOLIS

State

IN

Zip Code

46240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122535**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 618 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GLEN GOERGEN**

Mailing Address 8216 N GRAY LOG LANE

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122537**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEOFFREY S GOLDEN**

Mailing Address 3314 GREENWOOD LANE

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Golden Construction LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122539**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAURENCE GOLDFARB**

Mailing Address 11 GRACE AVENUE, SUITE 405

City	State	Zip Code
GREAT NECK	NY	11021

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LAURAND ASSOCIATES, INC.

Occupation  
COMMODITIES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.122540**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUDITH GOLDMAN**

Mailing Address 12728 BACCARAT CT.

City	State	Zip Code
GRASS VALLEY	CA	95945

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122541**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARC GOLDMAN**

Mailing Address PO BOX 8020

City	State	Zip Code
GARDEN CITY	NY	11530

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122543**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERIC GOLDSTEIN**

Mailing Address 9803 GINGERWOOD DR

City	State	Zip Code
TAMPA	FL	33626

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122544**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 620 / 2740

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

ERIC GOLDSTEIN

Mailing Address 9803 GINGERWOOD DR

City	State	Zip Code
TAMPA	FL	33626

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Transaction ID : SA17A.122545

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

RAYMOND G GOOCH

Mailing Address 6538 12TH AVE. NW

City	State	Zip Code
SEATTLE	WA	98117

FEC ID number of contributing federal political committee.

C

Name of Employer  
CRESCENT LIGHTINGOccupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.122547

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

SIDNEY GOODFRIEND

Mailing Address 115 ZACCHEUS MEAD LN

City	State	Zip Code
GREENWICH	CT	06831

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMERICAN CORPORATE PARTNERSOccupation  
FOUNDER/CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.122549

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3050.00

Total This Period (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 621 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

JEROME GOODIN

Mailing Address 1996 SOUTHWEST 176TH  
M

City	State	Zip Code
MIRAMAR	MI	00000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TRANSPORTATION ENERGY ANALYSOccupation  
MANAGING MEMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.122551

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

ANDREW GOODMAN

Mailing Address 198 BEECH STREET

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE WOLCOTT GROUPOccupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.122553

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

GREG GOODMAN

Mailing Address 2903 HARLINSDALE DR

City	State	Zip Code
ROCK HILL	SC	29732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAROLINA PADOccupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.122555

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3200.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 622 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL GOODMAN**

Mailing Address **99 S SERVICE ROAD**

City	State	Zip Code
<b>NEW HYDE PARK</b>	<b>NY</b>	<b>11040</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**210.00**

**Transaction ID : SA17A.122556**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL GOODMAN**

Mailing Address **99 S SERVICE ROAD**

City	State	Zip Code
<b>NEW HYDE PARK</b>	<b>NY</b>	<b>11040</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**320.00**

**Transaction ID : SA17A.122557**

Date of Receipt

**08 / 24 / 2015**

Amount of Each Receipt this Period

**110.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL GOODMAN**

Mailing Address **99 S SERVICE ROAD**

City	State	Zip Code
<b>NEW HYDE PARK</b>	<b>NY</b>	<b>11040</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**370.00**

**Transaction ID : SA17A.122558**

Date of Receipt

**09 / 11 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**260.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 623 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PRISCILLA GOODYEAR**

Mailing Address 10042 SIGNET CIRCLE

City	State	Zip Code
HUNTINGTON BEACH	CA	92646

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122559**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GENE GOPON**

Mailing Address 1153 LEE ST

City	State	Zip Code
DES PLAINES	IL	60016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122561**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRUCE E GORDON**

Mailing Address 445 WALNUT LN

City	State	Zip Code
SANTA BARBARA	CA	93111

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
L-TRONICS

Occupation  
ELECTORIN ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122563**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

900.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 624 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY N GORDON**

Mailing Address 149 PATRIOTS RD

City	State	Zip Code
MORRIS PLAINS	NJ	07950

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122564**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN GORDON**

Mailing Address PO BOX 1787

City	State	Zip Code
GRAND RAPIDS	MI	49501

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122566**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEBRA GORE**

Mailing Address 4825 EAGLE FEATHER DRIVE

City	State	Zip Code
AUSTIN	TX	78735

FEC ID number of contributing federal political committee.

C

Name of Employer  
REGENTS SCHOOL OF AUSTIN

Occupation  
TEACHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122568**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REX GORE**

Mailing Address 1304 W OLTORF STREET

City	State	Zip Code
AUSTIN	TX	78704

FEC ID number of contributing federal political committee.

C

Name of Employer  
PJS OF TEXAS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122570**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			06			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSH GORFINKLE**

Mailing Address 39 GRAND STREET, APT 3402

City	State	Zip Code
MAMARONECK	NY	10543

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122573**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES C GORMAN**

Mailing Address P.O. BOX 2599

City	State	Zip Code
MANSFIELD	OH	44906

FEC ID number of contributing federal political committee.

C

Name of Employer  
GORMAN RUPP CO.

Occupation  
CHAIRMAN OF THE BOARD

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122575**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 626 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES C GORMAN**

Mailing Address P.O. BOX 2599

City

MANSFIELD

State

OH

Zip Code

44906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GORMAN RUPP CO.

Occupation

CHAIRMAN OF THE BOARD

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122576**

Date of Receipt

MM / DD / YYYY  
08 / 11 / 2015

08

11

2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**M. M GORRIE**

Mailing Address 54 COUNTRY CLUB BLVD

City

MOUNTAIN BRK

State

AL

Zip Code

35213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRASFIELD & GORRIE LLC

Occupation

REAL ESTATE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122578**

Date of Receipt

MM / DD / YYYY  
08 / 07 / 2015

08

07

2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**M. J GORRIE**

Mailing Address PO BOX 10383

City

BIRMINGHAM

State

AL

Zip Code

35202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRASFIELD & GORRIE LLC

Occupation

REAL ESTATE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122580**

Date of Receipt

MM / DD / YYYY  
08 / 07 / 2015

08

07

2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 627 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JERRY GOSS**

Mailing Address 735 OAK HILLS PKWY

City	State	Zip Code
BATON ROUGE	LA	70810

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GODS WEALTH MGT

Occupation  
GODS WEALTH MGT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122582**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOSEPH N GOTHIE**

Mailing Address 703 GREENBRIAR RD

City	State	Zip Code
YORK	PA	17404

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GOTHE LAW FIRM LLC

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122584**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JON R GOTTSCHALK**

Mailing Address 2016 NW FORK ROAD

City	State	Zip Code
STUART	FL	34994

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122586**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 628 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FLOYD D GOTTWALD**

Mailing Address 300 HERNDON RD

City	State	Zip Code
RICHMOND	VA	23229

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.122588**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GWENDOLYN GOULD**

Mailing Address 2970 RIVERMEADE DRIVE NW

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

**Transaction ID : SA17A.122589**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALEXANDR R GRABER**

Mailing Address 123 CAMERON MEWS

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
OCCUPATIONAL THERAPIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122591**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2035.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 629 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD GRABER**

Mailing Address 123 CAMERON MEWS

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HONEYWELL

Occupation  
SR. VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122593**

Date of Receipt

M M / D D / Y Y Y Y  
07 16 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD GRABER**

Mailing Address 123 CAMERON MEWS

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HONEYWELL

Occupation  
SR. VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122594**

Date of Receipt

M M / D D / Y Y Y Y  
07 16 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES GRACE**

Mailing Address 3208 SAINT ANDREWS CT

City State Zip Code  
GREEN BAY WI 54301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ORTHOPEDIC SPORTS MEDICINE  
SPECIALISTS

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122596**

Date of Receipt

M M / D D / Y Y Y Y  
08 19 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 630 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALBERT J GRAF**

Mailing Address P.O. BOX 1569

City

WOLFEBORO

State

NH

Zip Code

03894

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122598**

Date of Receipt

MM / DD / YYYY  
08 / 14 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDITH E GRAFF**

Mailing Address 1302 GRAND ISLE CT

City

NAPLES

State

FL

Zip Code

34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMMUNITY FOUNDATION OF NORT

Occupation

BOARD OF TRUSTEES MEMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122600**

Date of Receipt

MM / DD / YYYY  
07 / 17 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM GRAFTON**

Mailing Address 3320 SOUTH JUSTIN ST.

City

FLAGSTAFF

State

AZ

Zip Code

86005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122602**

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 631 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM GRAFTON**

Mailing Address 3320 SOUTH JUSTIN ST.

City	State	Zip Code
FLAGSTAFF	AZ	86005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122603**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM GRAFTON**

Mailing Address 3320 SOUTH JUSTIN ST.

City	State	Zip Code
FLAGSTAFF	AZ	86005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.122604**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM GRAFTON**

Mailing Address 3320 SOUTH JUSTIN ST.

City	State	Zip Code
FLAGSTAFF	AZ	86005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

**Transaction ID : SA17A.122605**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 632 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ARLAN GRAGES**

Mailing Address 1011 BRITTNEY BLVD

City	State	Zip Code
MONTEVIDEO	MN	56265

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ADVISOR

Occupation  
EDWARD JONES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122606**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES GRAHAM**

Mailing Address 1118 N PERRY DR

City	State	Zip Code
PALATINE	IL	60067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122607**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES GRAHAM**

Mailing Address 1118 N PERRY DR

City	State	Zip Code
PALATINE	IL	60067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122608**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 633 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREG GRAMBOW**

Mailing Address **W166N5925 GREENWAY CIR**

City	State	Zip Code
<b>MENOMONEE FALLS</b>	<b>WI</b>	<b>53051</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DU-WELL GRINDING ENTERPRISES, INC.**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122610**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GORDON GRANGE**

Mailing Address **PO BOX 129**

City	State	Zip Code
<b>PARK CITY</b>	<b>UT</b>	<b>84060</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Unlimited Steel Inc**

Occupation  
**Owner**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.122612**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

**400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIDGET GRANT**

Mailing Address **578 RIDGECREST RD NE**

City	State	Zip Code
<b>ATLANTA</b>	<b>GA</b>	<b>30307</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122614**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 634 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIDGET GRANT**

Mailing Address 578 RIDGECREST RD NE

City	State	Zip Code
ATLANTA	GA	30307

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122615**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDY GRAVES**

Mailing Address 1076 COUNTY ROAD 415

City	State	Zip Code
FRIEDHEIM	MO	63747

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122617**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL GRAVES**

Mailing Address 934 N CATALINA STREET

City	State	Zip Code
BURBANK	CA	91505

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122618**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 635 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIAN GRAVES STA**

Mailing Address 1286 CHERRY SPRING RD

City	State	Zip Code
FREDERICKSBUR	TX	78624

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122620**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS J GRAVINA**

Mailing Address 18 DARTMOUTH LANE

City	State	Zip Code
HAVENFORD	PA	19041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GPX MANAGEMENT LLC

Occupation  
EXECUTIVE CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122622**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KATHARINE GRAY**

Mailing Address 9808 KINGSBRIDGE RD.

City	State	Zip Code
RICHMOND	VA	23238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122624**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 636 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SANDRA GRAY**

Mailing Address **PO BOX 641**

City State Zip Code  
**KAPAAU HI 96755**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122626**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID GRAYBILL**

Mailing Address **6309 S HUNTERS RUN**

City State Zip Code  
**PENDLETON IN 46064**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CENTRAL INDIANA ORTHOPEDICS**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1200.00**

**Transaction ID : SA17A.122627**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM GREAVES**

Mailing Address **8851 N BAYSIDE DR**

City State Zip Code  
**BAYSIDE WI 53217**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ABPM**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122629**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2250.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 637 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM GREAVES**

Mailing Address **8851 N BAYSIDE DR**

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ABPM**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.122630**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM GREAVES**

Mailing Address **8851 N BAYSIDE DR**

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ABPM**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122631**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM GREAVES**

Mailing Address **8851 N BAYSIDE DR**

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ABPM**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1100.00**

**Transaction ID : SA17A.122632**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 638 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM GREAVES**

Mailing Address **8851 N BAYSIDE DR**

City <b>BAYSIDE</b>	State <b>WI</b>	Zip Code <b>53217</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ABPM**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1200.00**

**Transaction ID : SA17A.122633**

Date of Receipt

M M / D D / Y Y Y Y
<b>08 / 31 / 2015</b>

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHERINE GREBE**

Mailing Address **11417 N. SPRING AVENUE**

City <b>MEQUON</b>	State <b>WI</b>	Zip Code <b>53092</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILLERCOORS**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122635**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 24 / 2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MIKE GREBE**

Mailing Address **7700 N PROSPECT AVENUE, APT 402**

City <b>MILWAUKEE</b>	State <b>WI</b>	Zip Code <b>53202</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122637**

Date of Receipt

M M / D D / Y Y Y Y
<b>06 / 19 / 2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 639 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALLEN GREEN**

Mailing Address 2685 MEADOWOOD DR

City	State	Zip Code
WESTON	FL	33332

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122638**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAMILLA GREEN**

Mailing Address 1600 OAK PLAINS ROAD

City	State	Zip Code
ASHLAND CITY	TN	37015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128907**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK GREEN**

Mailing Address 1600 OAK PLAINS ROAD

City	State	Zip Code
ASHLAND CITY	TN	37015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122640**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 640 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK GREEN**

Mailing Address 1600 OAK PLAINS ROAD

City	State	Zip Code
ASHLAND CITY	TN	37015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128905**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS GREEN**

Mailing Address 540 PELICAN BAY DRIVE

City	State	Zip Code
DAYTONA BEACH	FL	32119

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122642**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES GREENBERG**

Mailing Address 845 UN PLAZA #53B

City	State	Zip Code
NEW YORK	NY	10017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122644**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 641 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALBERT GREENE**

Mailing Address 32753 GREENWELL SPRI

City	State	Zip Code
GREENWELL SPR	LA	70739

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122646**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LARRY GREENFIELD**

Mailing Address 15021 VENTURA BOULEVARD, #849

City	State	Zip Code
SHERMAN OAKS	CA	91403

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
WEALTH MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122648**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT A. GREENHECK**

Mailing Address 3810 STERNBERG AVENUE

City	State	Zip Code
WESTON	WI	54476

FEC ID number of contributing federal political committee.

C

Name of Employer  
GREENHECK FAN CORPORATION

Occupation  
EXECUTIVE VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122650**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 642 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT C. GREENHECK**

Mailing Address 4021 CAMP PHILLIPS ROAD

City	State	Zip Code
SCHOFIELD	WI	54476

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GREENHECK FAN CORPORATION

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122651**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY GREENSPOON**

Mailing Address 6865 S.TROPICAL TRAIL

City	State	Zip Code
MERRITT ISLAND	FL	32952

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HEALTH FIRST

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122653**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY T GREGOIRE**

Mailing Address PO BOX 1349

City	State	Zip Code
RANCHO SANTA	CA	92067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122655**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 643 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID GREGORY**

Mailing Address 5539 PINE WOOD FOREST

City	State	Zip Code
ST. LOUIS	MO	63128

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122657**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES GREGORY**

Mailing Address 4580 SOUTHWOOD HTS DR

City	State	Zip Code
JAMESVILLE	NY	13078

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Upstate University Hospital**

Occupation  
**Surgeon**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122659**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RUTH B GREGORY**

Mailing Address 2320 E EDGEWOOD AVE

City	State	Zip Code
SHOREWOOD	WI	53211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122663**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 644 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AUGUST GREIDANUS**

Mailing Address 501 CUTTERS MILL LN

City	State	Zip Code
SCHAUMBURG	IL	60194

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122665**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID GRENADER**

Mailing Address 4708 CAROLINE

City	State	Zip Code
HOUSTON	TX	77004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122667**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER GRESH**

Mailing Address 166 EAST 34TH ST., APARTMENT 17F

City	State	Zip Code
NEW YORK	NY	10016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LINCOLN INTERNATIONAL

Occupation  
INVESTMENT BANKING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122669**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 645 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JEANETTE GRIESHOP**

Mailing Address **149 PARK ROAD**

City State Zip Code  
**FORT RECOVERY OH 45846**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122671**

Date of Receipt

**09 / 11 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT GRIESHOP**

Mailing Address **140 PARK ROAD**

City State Zip Code  
**FORT RECOVERY OH 45846**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**J&M**

Occupation  
**MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122673**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SCOTT GRIESHOP**

Mailing Address **140 PARK ROAD**

City State Zip Code  
**FORT RECOVERY OH 45846**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**J&M**

Occupation  
**MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1250.00**

**Transaction ID : SA17A.122674**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1550.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 646 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES GRIFFIN**

Mailing Address 1601 E JUNIPER WAY

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122676**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WAYNE GRIFFIN**

Mailing Address PO BOX 5807

City	State	Zip Code
KETCHUM	ID	83340

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122678**

Date of Receipt

**09 / 18 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LOIS J GRIFFITH**

Mailing Address 1500 SHERIDAN ROAD, APT

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122680**

Date of Receipt

**08 / 12 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8350.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 647 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****LOIS J GRIFFITH**

Mailing Address 1500 SHERIDAN ROAD, APT

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128903**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item**B. Full Name (Last, First, Middle Initial)****LOIS J GRIFFITH**

Mailing Address 1500 SHERIDAN ROAD, APT

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128904**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item**C. Full Name (Last, First, Middle Initial)****ROBERT GRIFFITH**

Mailing Address 1820 OAK KNOLL DR

City	State	Zip Code
BELMONT	CA	94002

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122682**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

250.00

Total This Period (last page this line number only).....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 648 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY GRIGGS**

Mailing Address 5663 LONGRIDGE DR

City	State	Zip Code
ROANOKE	VA	24018

FEC ID number of contributing federal political committee.

C

Name of Employer  
H & R BLOCK

Occupation  
TAX PREPARER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122684**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN GRIGSBY**

Mailing Address PO BOX 72768

City	State	Zip Code
MARIETTA	GA	30007

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122686**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD GROFF**

Mailing Address 313 PERFECTO LOPEZ R

City	State	Zip Code
CORRALES	NM	87048

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.122687**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 649 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD GROFF**

Mailing Address **313 PERFECTO LOPEZ R**

City	State	Zip Code
CORRALES	NM	87048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**308.00**

**Transaction ID : SA17A.122688**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

**105.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KENNETH GROSS**

Mailing Address **5222 BALBOA AVE**

City	State	Zip Code
SAN DIEGO	CA	92117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MEDICAL**

Occupation  
**DENTAL SURGERY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122689**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			10			2015			

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BARBARA GROSSMEYER**

Mailing Address **W68N328 PALMETTO CT**

City	State	Zip Code
CEDARBURG	WI	53012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**535.00**

**Transaction ID : SA17A.122690**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**755.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 650 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANNA GROSVENOR**

Mailing Address 7410 W LAYTON WAY

City	State	Zip Code
LITTLETON	CO	80123

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122692**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK M GROUT**

Mailing Address 9396 E SANDY WHISKERS P

City	State	Zip Code
TUCSON	AZ	85710

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122693**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROSALIND R GROVER**

Mailing Address PO BOX 2127

City	State	Zip Code
MIDLAND	TX	79702

FEC ID number of contributing federal political committee.

C

Name of Employer  
PRODUCER

Occupation  
INDEPENDENT OIL & GAS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122695**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 651 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL L GRUCHALA**

Mailing Address **8320 HALLER STREET**

City State Zip Code  
**WESTLAND MI 48185**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122697**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIE GUBASH**

Mailing Address **1380 25TH ST**

City State Zip Code  
**HOULTON WI 54082**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**Registered Nurse**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5000.00**

**Transaction ID : SA17A.122699**

Date of Receipt

**08 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JULIE GUBASH**

Mailing Address **1380 25TH ST**

City State Zip Code  
**HOULTON WI 54082**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**Registered Nurse**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.122700**

Date of Receipt

**08 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2500.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 652 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK GUBASH**

Mailing Address

City

State

Zip Code

WI

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.122702**

Date of Receipt

**08 / 20 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY GUBBINS**

Mailing Address 18145 COOPERS LN

City

BROOKFIELD

State

WI

Zip Code

53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
XACT WIRE EDM

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122704**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHERI GUENTHNER**

Mailing Address 400 LENELL ROAD

City

FORT MYERS BE

State

FL

Zip Code

33931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122706**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 653 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
THE DERMATOLOGY CENTER OF INDIANA, PC	DERMATOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122708**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
THE DERMATOLOGY CENTER OF INDIANA, PC	DERMATOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.122709**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
THE DERMATOLOGY CENTER OF INDIANA, PC	DERMATOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122709.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 654 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE DERMATOLOGY CENTER OF INDIANA, I

Occupation  
DERMATOLOGIST

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5900.00

**Transaction ID : SA17A.122709.1**

Date of Receipt

**07 / 23 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
11/16/2015

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE DERMATOLOGY CENTER OF  
INDIANA, PC

Occupation  
DERMATOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5900.00

**Transaction ID : SA17A.122710**

Date of Receipt

**07 / 23 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE DERMATOLOGY CENTER OF  
INDIANA, PC

Occupation  
DERMATOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.122710.0**

Date of Receipt

**07 / 23 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 655 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT GUENTHNER**

Mailing Address 6110 STONEGATE RUN

City	State	Zip Code
ZIONSVILLE	IN	46077

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
THE DERMATOLOGY CENTER OF INDIANA, I	DERMATOLOGIST

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5900.00

**Transaction ID : SA17A.122710.1**

Date of Receipt

**07** / **23** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ERNESTO GUERRA**

Mailing Address 3216 STARTING GATE COURT

City	State	Zip Code
WOODBINE	MD	21797

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.122711**

Date of Receipt

**08** / **23** / **2015**

Amount of Each Receipt this Period

110.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FREDERIC GUEST**

Mailing Address 400 ALTON ROAD

A

City	State	Zip Code
MIAMI BEACH	FL	33139

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.122713**

Date of Receipt

**07** / **14** / **2015**

Amount of Each Receipt this Period

700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

810.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 656 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.122714**

Date of Receipt

**07** / **22** / **2015**

Amount of Each Receipt this Period

15.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.122715**

Date of Receipt

**07** / **22** / **2015**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

**Transaction ID : SA17A.122716**

Date of Receipt

**07** / **24** / **2015**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

75.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 657 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

**Transaction ID : SA17A.122717**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

20.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

**Transaction ID : SA17A.122718**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

15.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

**Transaction ID : SA17A.122719**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

60.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 658 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

365.00

**Transaction ID : SA17A.122720**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARIETTA S GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

380.00

**Transaction ID : SA17A.122721**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2015

Amount of Each Receipt this Period

15.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WAYNE GULLEDGE**

Mailing Address 1970 QUEENS BLUFF WAY

City	State	Zip Code
CLARKSVILLE	TN	37043

FEC ID number of contributing federal political committee.

C

Name of Employer  
FOUR SEASONS

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122723**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 659 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANICE GULSVIG**

Mailing Address 2304 TALON LANE

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Align

Occupation  
Co-Founder & COO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122725**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NEIL GULSVIG**

Mailing Address 2304 TALON LANE

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Align

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122727**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NEIL GULSVIG**

Mailing Address 2304 TALON LANE

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Align

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122728**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 660 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****MILTON GUMOWITZ**

Mailing Address 3 BIRCHALL DR

City

SCARSDALE

State

NY

Zip Code

10583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122730**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****WILLIAM GUNNELLS III**

Mailing Address 2120 BROOK HIGHLAND RIDGE

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RXBENEFITS, INC.

Occupation

PRESCRIPTION CLAIM ADMINISTRATION

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122732**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****GARY GUSSEL**

Mailing Address 25 SISKIWIT CIR

City

MADISON

State

WI

Zip Code

53719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRAVEL MART, INC.

Occupation

SMALL BUSINESS OWNER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122734**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

8350.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 661 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY GUSSEL**

Mailing Address **25 SISKIWIT CIR**

City	State	Zip Code
MADISON	WI	53719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TRAVEL MART, INC.**

Occupation  
**SMALL BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122735**

Date of Receipt

**08 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J. T GUSSEL**

Mailing Address **PO BOX 447**

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Ad-Lit Distribution**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122737**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JADE GUSSEL**

Mailing Address **25 SISKIWIT CIR**

City	State	Zip Code
MADISON	WI	53719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122739**

Date of Receipt

**08 / 14 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BUD GUSSEL, JR.**

Mailing Address 505 CEDAR STREET

City	State	Zip Code
WISCONSIN DELLS	WI	53965

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122741**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAMELA S GUSSEL**

Mailing Address 421 CHURCH ST

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ad-Lit Distribution

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122743**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD GUSTAFSON**

Mailing Address 5 COBBLE HILL RD

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SHIPMAN & GOODWIN LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122745**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL R GUSTAFSON**

Mailing Address 4021 MOUNTAIN SHADOW PLACE

City	State	Zip Code
RAPID CITY	SD	57702

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
First Gold Hotel & Casino

Occupation  
President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122747**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KIM GUTSCHENRI**

Mailing Address W2700 STATE ROAD 67

City	State	Zip Code
IRON RIDGE	WI	53035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RESTUR. OW

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.122749**

Date of Receipt

**08 / 26 / 2015**

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SALLIE GUY**

Mailing Address 101 PASEO ENCINAL

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MANUFACTURING MANAGEMENT

Occupation  
PRES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122751**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 664 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LOUIS GUZZETTI**

Mailing Address 90 FERRIS HILL RD.

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SPINNAKER COATING, LLC

Occupation  
CHAIRMAN & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122753**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL HAACK**

Mailing Address 550 PARK CIR

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.122754**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SANDRA HAACK**

Mailing Address 1245 OVERHILL RD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WILLIAM AND SANDRA HAACK FAMILY FOUNDATION

Occupation  
FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122756**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 665 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM R HAACK**

Mailing Address 1245 OVERHILL RD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HAACK VENTURES LLC**

Occupation  
**C.E.O.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122758**

Date of Receipt

**06 / 19 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM R HAACK**

Mailing Address 1245 OVERHILL RD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HAACK VENTURES LLC**

Occupation  
**C.E.O.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122759**

Date of Receipt

**06 / 19 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT HAAG**

Mailing Address 825 N PROSPECT AVE

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Moore Oil**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122761**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 666 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALISON HAAS**

Mailing Address 9 BRAEMAR CT.

City	State	Zip Code
BYRAM TOWNSHIP	NJ	07821

FEC ID number of contributing federal political committee.

C

Name of Employer  
HAAS ASSOCIATES, PC

Occupation  
OFFICE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122763**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WARREN R HAAS**

Mailing Address 38 POCONO RD

City	State	Zip Code
DENVILLE	NJ	07834

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122765**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRONSON HAASE**

Mailing Address 6948 WILDWOOD POINT ROAD

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122767**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		23		2015

Amount of Each Receipt this Period

350.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT HABELMAN**

Mailing Address 1488 AQUA RD

City	State	Zip Code
BLACK RIVER F	WI	54615

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122769**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDRA HABERKORN**

Mailing Address 6500 SMITHTOWN ROAD

City	State	Zip Code
EXCELSIOR	MN	55331

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122770**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD HACKER**

Mailing Address S64 W31404 VALLEY LANE

City	State	Zip Code
MUKWONAGO	WI	53149

FEC ID number of contributing federal political committee.

C

Name of Employer  
EPS, INC.

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122772**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**T. M HACKNEY**

Mailing Address 40 COUNTRY CLUB RD

City	State	Zip Code
MOUNTAIN BRK	AL	35213

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.122773**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL HAGERMAN**

Mailing Address 4061 CLUBVIEW CT.

City	State	Zip Code
ROCKLIN	CA	95765

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122775**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS HAGUE**

Mailing Address 2508 BOULDER ROAD

City	State	Zip Code
ALTADENA	CA	91001

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.122777**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 669 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**S. DOUGL HAHN**

Mailing Address **34 GARDINERS BAY DR**

City <b>SHELTER ISLAN</b>	State <b>NY</b>	Zip Code <b>11965</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAPITAL REGION LIVING MAGAZINE**

Occupation  
**PUBLISHER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122779**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAWRENCE HAKE**

Mailing Address **1038 WOODLAND WAY**

City <b>LAKE GENEVA</b>	State <b>WI</b>	Zip Code <b>53147</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122781**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIMOTHY HALDEMAN**

Mailing Address **1138 LAS PULGAS RD**

City <b>PACIFIC PALISADES</b>	State <b>CA</b>	Zip Code <b>90272</b>
----------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122783**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 670 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID HALEY**

Mailing Address PO BOX 65349

City	State	Zip Code
UNIVERSITY PLACE	WA	98464

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122785**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL HALEY**

Mailing Address 4012 HUNTSTEED WAY

City	State	Zip Code
HENRICO	VA	23233

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GENWORTH FINANCIAL

Occupation  
ACTUARY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122787**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES M HALL**

Mailing Address 2922 OWEN STREET

City	State	Zip Code
SAN DIEGO	CA	92106

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122789**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 671 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

JAMES HALL

Mailing Address 5900 INTERLACHEN CT

City	State	Zip Code
HAYMARKET	VA	20169

FEC ID number of contributing federal political committee.

C

Name of Employer  
GARTNEROccupation  
SENIOR ACCOUNT EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.122790**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

JAMES HALL

Mailing Address 5900 INTERLACHEN CT

City	State	Zip Code
HAYMARKET	VA	20169

FEC ID number of contributing federal political committee.

C

Name of Employer  
GARTNEROccupation  
SENIOR ACCOUNT EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122791**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		19		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

JOHN G HALL

Mailing Address PO DRAWER 6657

City	State	Zip Code
DOTHAN	AL	36302

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122793**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

325.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 672 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LAWRENCE HALL**

Mailing Address P.O. BOX 728

City

ELIZABETHTOWN

State

KY

Zip Code

42702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122795**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAURENCE HALLAS**

Mailing Address 1350 WAKESHIRE TER

City

BALLWIN

State

MO

Zip Code

63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALMOSTEUROPE LMII

Occupation

SELF-EMPLOYED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122797**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID S HALLER**

Mailing Address 22 JONQUIL DR

City

NEWTOWN

State

PA

Zip Code

18940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122799**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 673 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM HALQUIST**

Mailing Address P.O. BOX 308

City	State	Zip Code
SUSSEX	WI	53089

FEC ID number of contributing federal political committee.

C

Name of Employer  
HALQUIST COMPANY

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122801**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN HALVERSON**

Mailing Address 1826 STONEBROOK LN

City	State	Zip Code
CLOVIS	CA	93611

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1060.00

**Transaction ID : SA17A.122802**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN HALVERSON**

Mailing Address 1826 STONEBROOK LN

City	State	Zip Code
CLOVIS	CA	93611

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1085.00

**Transaction ID : SA17A.122803**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1525.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 674 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALAN HALVERSON**

Mailing Address 1826 STONEBROOK LN

City	State	Zip Code
CLOVIS	CA	93611

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1135.00

**Transaction ID : SA17A.122804**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CURT HAMES**

Mailing Address PO BOX 217

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HAMES HOMES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.122809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

REFUNDED ON 7/9/2015

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CURT HAMES**

Mailing Address PO BOX 217

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HAMES HOMES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.122807**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 675 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CURT HAMES**

Mailing Address PO BOX 217

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HAMES HOMES**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.128817**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NORMA HAMES**

Mailing Address PO BOX 217

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HAMES HOMES**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.128818**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

REATTRIBUTED

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES HAMIL**

Mailing Address 29 VALENCIA DR

City	State	Zip Code
NASHUA	NH	03062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**COVENANT HEALTH SYSTEMS**

Occupation  
**BOARD OF DIRECTORS MEMBE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122812**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 676 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA A HAMILTON**

Mailing Address 120 E 73RD ST

City	State	Zip Code
INDIANAPOLIS	IN	46240

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122813**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANET L HAMILTON**

Mailing Address 4616 PALM DR.

City	State	Zip Code
LA CANADA	CA	91011

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122815**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RONALD HAMILTON**

Mailing Address PO BOX 2429

City	State	Zip Code
FORNEY	TX	75126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.122817**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1320.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 677 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**LLOYD HANAHA**

Mailing Address 10001 WEST 156 STREET

City	State	Zip Code
OVERLAND PARK	KS	66221

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122819**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MELISSA HANCOCK**

Mailing Address 742 MT. PLEASANT RD.

City	State	Zip Code
BRYN MAWR	PA	19010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122821**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MIKE HANEN-SMIT**

Mailing Address 241 NORMAN RIDGE DR

City	State	Zip Code
MINNEAPOLIS	MN	55437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RIVER LAKE CLINIC**

Occupation  
**OPTOMETRIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122827**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 678 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**F. B HANES**

Mailing Address **380 KNOLLWOOD ST**

City <b>WINSTON SALEM</b>	State <b>NC</b>	Zip Code <b>27103</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BOWEN, HANES & COMPANY INC**

Occupation  
**INVESTMENT COUNSEL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122829**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JONATHAN HANGAS**

Mailing Address **PO BOX 95**

City <b>GROSSE ILE</b>	State <b>MI</b>	Zip Code <b>48138</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FORD MOTOR COMPANY**

Occupation  
**RESEARCH SCIENTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122831**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALLY HANKWITZ**

Mailing Address **1106 SUSSEX DRIVE**

City <b>KINGSPORT</b>	State <b>TN</b>	Zip Code <b>37660</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HIGHLANDS HEALTH MGMT**

Occupation  
**MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122833**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 679 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**COLIN HANNA**

Mailing Address 603 FAIRWAY DR

City	State	Zip Code
WEST CHESTER	PA	19382

FEC ID number of contributing federal political committee.

C

Name of Employer  
LET FREEDOM RING

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122835**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED HANNA**

Mailing Address 3360 LOWER ROSWELL ROAD

City	State	Zip Code
MARIETTA	GA	30068

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122837**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WAYNE W HANNA**

Mailing Address N31W23933 OLD FARM C

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

C

Name of Employer  
COTTA TRANSMISSION COMPANY

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122839**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 680 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROGER HANNAN**

Mailing Address 1420 RONAN CT

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

WEALTH ADVISOR CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122841**

Date of Receipt

MM / DD / YYYY  
06 / 29 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROGER HANNAN**

Mailing Address 1420 RONAN CT

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

WEALTH ADVISOR CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122842**

Date of Receipt

MM / DD / YYYY  
07 / 24 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROGER HANNAN**

Mailing Address 1420 RONAN CT

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

WEALTH ADVISOR CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122843**

Date of Receipt

MM / DD / YYYY  
08 / 18 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 681 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER J HANNON**

Mailing Address 962 TARRANT DR

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122845**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARL W HANSEN**

Mailing Address 1414 S 65TH ST

City	State	Zip Code
MILWAUKEE	WI	53214

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.122847**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

210.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL F HANSEN**

Mailing Address 12507 N ST. ANNE COURT

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122849**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1460.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 682 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY HANSEN**

Mailing Address **138 JAFFREES ROAD**

City	State	Zip Code
<b>MALVERN</b>	<b>PA</b>	<b>19355</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122851**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>31</b>		<b>2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDRA E HANSEN-HAR**

Mailing Address **385 LEGEND VW**

City	State	Zip Code
<b>WALES</b>	<b>WI</b>	<b>53183</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**R.N.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122853**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>14</b>		<b>2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SANDRA E HANSEN-HAR**

Mailing Address **385 LEGEND VW**

City	State	Zip Code
<b>WALES</b>	<b>WI</b>	<b>53183</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**R.N.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.122854**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>15</b>		<b>2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SANDRA HANSEN-HARSH**

Mailing Address 385 LEGEND VIEW

City	State	Zip Code
WALES	WI	53183

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122856**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTIANA HANSON**

Mailing Address N2083 WINCHESTER ROAD

City	State	Zip Code
HORTONVILLE	WI	54944

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INSURANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122858**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROGER HARBIN**

Mailing Address 16225 NE 112TH CT

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122860**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 684 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRYAN HARDEMAN**

Mailing Address **6757 AIRPORT BLVD**

City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78752</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122862**

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEITH P HARDENDA**

Mailing Address **1825 OLD OAK CT**

City <b>BROOKFIELD</b>	State <b>WI</b>	Zip Code <b>53005</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KPH CONSTRUCTION**

Occupation  
**FOUNDER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122864**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES HARDERS**

Mailing Address **7413 COBBLESTONE CT**

City <b>MCKINNEY</b>	State <b>TX</b>	Zip Code <b>75070</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.122866**

Date of Receipt

M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRANK HARDESTY**

Mailing Address 1101 WATER POINTE LANE

City	State	Zip Code
RESTON	VA	20194

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.122868**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIM HARDING**

Mailing Address 15696 HARDING RD

City	State	Zip Code
BRYAN	TX	77807

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
DITCH-DIGGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122870**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROLY HARICH**

Mailing Address PO BOX 1087

City	State	Zip Code
RUNNING SPRINGS	CA	92382

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122872**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 686 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES HARKER**

Mailing Address PO BOX 58

City	State	Zip Code
BELOIT	WI	53512

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122874**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERRY HARKINS**

Mailing Address 13599 PERDIDO KEY DR  
T

City	State	Zip Code
PENSACOLA	FL	32507

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122876**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN HARMER**

Mailing Address P.O. BOX 721

City	State	Zip Code
BOUNTIFUL	UT	84011

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122878**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 687 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH HARMON**

Mailing Address **2411 N 68TH STREET**

City <b>WAUWATOSA</b>	State <b>WI</b>	Zip Code <b>53213</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122880**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOMMY HARMON**

Mailing Address **1600 GULF BLVD**

City <b>CLEARWATER</b>	State <b>FL</b>	Zip Code <b>33767</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122882**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS HARRINGTON**

Mailing Address **11 MARINERS LANE**

City <b>KEMAH</b>	State <b>TX</b>	Zip Code <b>77565</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.122884**

Date of Receipt

**09 / 02 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 688 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BOBBYE F HARRIS**

Mailing Address 135 WINDSOR DR

City	State	Zip Code
CALHOUN	GA	30701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122886**

Date of Receipt

**07** / **31** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CURTIS HARRIS**

Mailing Address 19940 COUNTY ROAD 15

City	State	Zip Code
ADA	OK	74820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122888**

Date of Receipt

**06** / **23** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CURTIS HARRIS**

Mailing Address 19940 COUNTY ROAD 15

City	State	Zip Code
ADA	OK	74820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122889**

Date of Receipt

**07** / **23** / **2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CYNTHIA C HARRIS**

Mailing Address 18235 W BURLEIGH RD

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122891**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANK HARRIS**

Mailing Address 7425 PELICAN BAY BLV  
2

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122892**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			19			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK HARRIS**

Mailing Address 7425 PELICAN BAY BLV  
2

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.122893**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			27			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUSTIN HARRIS**

Mailing Address 145 PLEASANT ST.

City	State	Zip Code
WEST FORK	AR	72774

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STATE OF ARKANSAS

Occupation  
AR STATE REPRESENTATIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122895**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEN HARRIS**

Mailing Address 5301 GULF BLVD E610

City	State	Zip Code
ST PETE BEACH	FL	33706

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122897**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NATHANIE HARRIS**

Mailing Address 205 POWELL PL

City	State	Zip Code
BRENTWOOD	TN	37027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122899**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PHILLIP HARRIS**

Mailing Address 1613 JULIE ST

City	State	Zip Code
UNION CITY	TN	38261

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
VAUGHN ELECTRIC CO.

Occupation  
ELECTRICAL CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122901**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**R JEFFRE J HARRIS**

Mailing Address 18235 W BURLEIGH RD

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122903**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**R JEFFRE J HARRIS**

Mailing Address 18235 W BURLEIGH RD

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122904**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALLACE HARRIS**

Mailing Address **4447 WOODLAND HILLS CIRCLE**

City	State	Zip Code
PINSON	AL	35126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122905**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J. F HARRISON**

Mailing Address **4100 COCA COLA PLAZA**

City	State	Zip Code
CHARLOTTE	NC	28211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.122907**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	5

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MYRON G HARRISON**

Mailing Address **PO BOX 4144**

City	State	Zip Code
VENTURA	CA	93007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HARRISON INC**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122909**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3100.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD HARRISON**

Mailing Address **984 HIGHLAND SPRINGS COURT**

City <b>ONEIDA</b>	State <b>WI</b>	Zip Code <b>54155</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BAYCARE CLINIC**

Occupation  
**SURGEON**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122911**

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT HARRISON**

Mailing Address **9640 MITCHELL PL**

City <b>BRENTWOOD</b>	State <b>TN</b>	Zip Code <b>37027</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RED CLOUD INC.**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122913**

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM HARRISON**

Mailing Address **16038 MESA VERDE DR**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77059</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.122914**

Date of Receipt

M M / D D / Y Y Y Y
07 / 26 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1350.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CURTIS HARSHAW**

Mailing Address 2110 WESTFIELD ST

City	State	Zip Code
GRAND PRAIRIE	TX	75050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HERSHAM ASSET MGMT**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122916**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J STEVEN HART**

Mailing Address 3823 FORDHAM RD NW

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WILLIAMS & JENSEN PLLC**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122918**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KELLY HART**

Mailing Address 939 N 2ND ST

City	State	Zip Code
ROCKFORD	IL	61107

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MARTIN AUTOMATIC INC.**

Occupation  
**COMMUNICATIONS & ADVERTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122920**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 695 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**R. HART**

Mailing Address 5650 W QUINCY AVE UNIT

City	State	Zip Code
DENVER	CO	80235

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122922**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VICKI HART**

Mailing Address 3823 FORDHAM RD NW

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HART HEALTH STRATEGIES

Occupation  
HEALTH POLICY CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122924**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**L HARTLINE**

Mailing Address 30 OLD STATE RD

City	State	Zip Code
READING	PA	19606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122926**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MR. BERNARD E HARTMAN**

Mailing Address 108 LARISA LANE

City	State	Zip Code
ITHACA	NY	14850

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122927**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL HARTUNG**

Mailing Address 708 HEARTLAND TRAIL

City	State	Zip Code
MADISON	WI	53717

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HARTUNG BROTHERS INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122929**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN HARTUNG**

Mailing Address 990 S SPRINGDALE ROAD

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HARTUNG BROTHERS, INC.

Occupation  
CHIEF LEGAL OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122931**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 697 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM HARVIE**

Mailing Address 9747 PEBBLE BEACH DR

City	State	Zip Code
SANTEE	CA	92071

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TORREY PINES HIGH SCHOOL

Occupation  
PHYSICS TEACHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122933**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LORRAINE HARWELL**

Mailing Address 5913 VALLEYBROOK DRIVE

City	State	Zip Code
PLANO	TX	75093

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122935**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM HARWOOD**

Mailing Address 15295 WESTOVER ROAD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122937**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 698 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN H HASLEY**

Mailing Address 8029 S BRIDGE WAY

City	State	Zip Code
MAUMEE	OH	43537

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122939**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GRETCHEN HASS**

Mailing Address 18124 WEDGE PARKWAY

City	State	Zip Code
RENO	NV	89511

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122941**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**W. E HASSINGER**

Mailing Address 305 W AVONDALE DR

City	State	Zip Code
GREENSBORO	NC	27403

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.00

**Transaction ID : SA17A.122942**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

180.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

980.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 699 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANINE HATFIELD**

Mailing Address 270 COUNTRY RD

City	State	Zip Code
UNION	SC	29379

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.122944**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GAVIN D HATTERSLEY**

Mailing Address 400 CLAYTON ST

City	State	Zip Code
DENVER	CO	80206

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MOLSON COORS

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122946**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SAMUEL HAUERT**

Mailing Address 1821 N NORTON AVE.

City	State	Zip Code
TUCSON	AZ	85719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122948**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 700 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PHILIP HAUGHT**

Mailing Address 125 CLEAR LAKE DRIVE

City	State	Zip Code
PONTE VEDRA B	FL	32082

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PRESIDENT**

Occupation  
**HAUGHT FINANCIAL GROUP INC**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.122949**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL F HAUGHTON**

Mailing Address 144 BUTTERNUT RD

City	State	Zip Code
TROUTMAN	NC	28166

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122951**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY HAUSER**

Mailing Address 3735 COMMENCEMENT BAY D

City	State	Zip Code
TACOMA	WA	98407

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122953**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 701 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY HAUSER**

Mailing Address 3735 COMMENCEMENT BAY D

City	State	Zip Code
TACOMA	WA	98407

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122954**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHERIN HAUSKE**

Mailing Address 900 W BRADLEY RD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122956**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS J HAUSKE**

Mailing Address 900 W BRADLEY RD

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EVERETT SMITH GROUP

Occupation  
EXEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122958**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 702 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS J HAUSKE**

Mailing Address 900 W BRADLEY RD

City	State	Zip Code
MILWAUKEE	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EVERETT SMITH GROUP**

Occupation  
**EXEC**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122959**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY R HAUSMANN**

Mailing Address 4728 SUMAC ROAD

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122961**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JULIAN HAWES**

Mailing Address 14125 W BRAEMORE CLO

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122963**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 703 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS HAWK**

Mailing Address **105 MCKELLAR ST**

City <b>LINCOLNTON</b>	State <b>NC</b>	Zip Code <b>28092</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.122964**

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BEN HAWKINS**

Mailing Address **38 RIDGE VIEW DR**

City <b>ATGLEN</b>	State <b>PA</b>	Zip Code <b>19310</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INTERNATIONAL BUSINESS MACHINES**

Occupation  
**SALES EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**210.00**

**Transaction ID : SA17A.122965**

Date of Receipt

M M / D D / Y Y Y Y
08 / 16 / 2015

Amount of Each Receipt this Period

**75.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MRS EDITH P HAWKINS**

Mailing Address **12 W SHADY LANE**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77063</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122967**

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**475.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 704 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES HAWKINS**

Mailing Address 1020 LAKESIDE DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122969**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JAMES HAWKINS**

Mailing Address 1020 LAKESIDE DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122970**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JAMES HAWKINS**

Mailing Address 1020 LAKESIDE DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.122970.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES HAWKINS**

Mailing Address 1020 LAKESIDE DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.122970.1**

Date of Receipt

**08 / 31 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK HAWLEY**

Mailing Address 230 ROOSEVELT STREET

City	State	Zip Code
FOND DU LAC	WI	54935

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
J & H CONTROLS, INC.

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122971**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY HAYER**

Mailing Address 907 COVENTRY PLACE

City	State	Zip Code
EDINA	MN	55435

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PARK NICOLLET

Occupation  
SPEECH PATHOLOGY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.115682**

Date of Receipt

**06 / 23 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

100.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY HAYER**

Mailing Address 907 COVENTRY PLACE

City	State	Zip Code
EDINA	MN	55435

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PARK NICOLLET**

Occupation  
**SPEECH PATHOLOGY**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

**Transaction ID : SA17A.115683**

Date of Receipt

**06 / 23 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

50.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY HAYER**

Mailing Address 907 COVENTRY PLACE

City	State	Zip Code
EDINA	MN	55435

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PARK NICOLLET**

Occupation  
**SPEECH PATHOLOGY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

**Transaction ID : SA17A.122972**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID HAYES**

Mailing Address 740 OCEAN AVE

City	State	Zip Code
NEW LONDON	CT	06320

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122974**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID HAYES**

Mailing Address **740 OCEAN AVE**

City State Zip Code  
**NEW LONDON CT 06320**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**650.00**

**Transaction ID : SA17A.122975**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**400.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT HAYES**

Mailing Address **PO BOX 954**

City State Zip Code  
**CONCORD NC 28026**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.122977**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHARON HAYHOE**

Mailing Address **1851 PARK SKYLINE RD**

City State Zip Code  
**SANTA ANA CA 92705**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.122978**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 708 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER HAYHURST**

Mailing Address 45902 ROAD 144

City	State	Zip Code
ORANGE COVE	CA	93646

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122980**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANNY HAYNES**

Mailing Address 5305 E STATE RD 67

City	State	Zip Code
CLINTON	WI	53525

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122982**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HOWARD HAYNES**

Mailing Address 9061 WINTER SPRING DRIVE

City	State	Zip Code
MECHANICSVILLE	VA	23116

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122984**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 709 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH HAYNES**

Mailing Address 3808 THADEUS CT

City	State	Zip Code
LEXINGTON	KY	40509

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122985**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM HAYNES**

Mailing Address 40 CENTRAL PARK SOUTH

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.122987**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL S HAYS**

Mailing Address 2150 S OCEAN BOULEVARD

City	State	Zip Code
DELRAY BEACH	FL	33483

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122989**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD HAYS**

Mailing Address 2337 MASONIC DR

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.122990**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT HAYS**

Mailing Address 2040 LAKESHORE DR

City	State	Zip Code
AGOURA HILLS	CA	91301

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.122992**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN HAZLETT**

Mailing Address 725 GALLOWAY DR

City	State	Zip Code
FAYETTEVILLE	NC	28303

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.122993**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 711 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS J HEALEY**

Mailing Address 108 CORNWELL HL

City	State	Zip Code
MARSHFIELD	MA	02050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ALLETES INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122995**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTOP HEALY**

Mailing Address 27 DORCHESTER RD

City	State	Zip Code
WETHERSFIELD	CT	06109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STATE OF CONNECTICUT

Occupation  
LEGISLATIVE EMPLOYEE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122997**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIMOTHY J HEALY**

Mailing Address 1200 5TH AVE

City	State	Zip Code
NEW YORK	NY	10029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
THE HEALTH GROUP LLC

Occupation  
CIO FOUNDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.122999**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD P HEARDEN**

Mailing Address **2269 TORDEUR CT**

City	State	Zip Code
GREEN BAY	WI	54311

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FIRSTMERIT BANK**

Occupation  
**SENIOR VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123001**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN HEATER**

Mailing Address **106 BIRCH STREET**

City	State	Zip Code
GASSAWAY	WV	26624

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GO-MART INC**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123003**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER HEBERER**

Mailing Address **3429 TWIN OAKS COURT**

City	State	Zip Code
WEST BLOOMFIELD	MI	48324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.123005**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1453.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES HECKLER**

Mailing Address **BOX 210602**

City State Zip Code  
**AUKE BAY AK 99821**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123007**

Date of Receipt

**06 / 21 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DALE HEDRICK**

Mailing Address **2200 CENTREPARK WEST DRIVE**

City State Zip Code  
**WEST PALM BEACH FL 33509**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HEDRICK BROTHERS**

Occupation  
**GENERAL CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123009**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BARBARA J HEGWOOD**

Mailing Address **S79W36855 WILTON RD**

City State Zip Code  
**EAGLE WI 53119**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123011**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1250.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN HEIDEN**

Mailing Address **162 PARKS ROAD**

City	State	Zip Code
JACKSON	MS	39212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HEIDEN& GARLAND**

Occupation  
**INSURANCE AGENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123013**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEONARD J HEIDT**

Mailing Address **16563 OTTER LANE NE**

City	State	Zip Code
MOUNT ANGEL	OR	97362

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123015**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS HEIGLE**

Mailing Address **15462 COVEY CIRCLE**

City	State	Zip Code
AMISSVILLE	VA	20106

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE AEROSPACE CORP**

Occupation  
**SYSTEMS ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123017**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CRAIG HEILMAN**

Mailing Address 2012 W CANYON DR

City	State	Zip Code
COEUR D ALENE	ID	83815

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
C.L. HEILMAN CO INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123019**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY L HEIN**

Mailing Address 2 PARSONS LN

City	State	Zip Code
DECATUR	IL	62526

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINCOLN DIAGNOSTICS

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123021**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOEL E HEIN**

Mailing Address 222 W MISSION ROAD

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123023**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 716 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LEE HEINE**

Mailing Address P.O. BOX 181

City	State	Zip Code
HILLSBORO	WI	54634

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123025**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATRINA HEINRICH STEINBERG**

Mailing Address 34708 VISTA DEL SOL

City	State	Zip Code
RANCHO MIRAGE	CA	92270

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123027**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED C HEITMAN**

Mailing Address 2830 E CORONADO ST

City	State	Zip Code
ANAHEIM	CA	92806

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HEITMAN HOLDINGS INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123029**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 717 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGORY HEKEL**

Mailing Address 10290 FRIENDSHIP CT

City	State	Zip Code
FAIRFAX	VA	22032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.123030**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

30.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREGORY HEKEL**

Mailing Address 10290 FRIENDSHIP CT

City	State	Zip Code
FAIRFAX	VA	22032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123031**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2015

Amount of Each Receipt this Period

30.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL HELLAND**

Mailing Address 1221 24TH ST NW APT 506

City	State	Zip Code
WASHINGTON	DC	20037

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
US DEPT. OF HHS

Occupation  
STAFF ASST.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123033**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

560.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 718 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERARD HELLEBUSCH**

Mailing Address 143 COUNTRY RIDGE LN

City	State	Zip Code
WASHINGTON	MO	63090

FEC ID number of contributing federal political committee.

C

Name of Employer  
GH TOOL & MOLD

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123035**

Date of Receipt

MM / DD / YYYY  
06 / 19 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERARD HELLEBUSCH**

Mailing Address 143 COUNTRY RIDGE LN

City	State	Zip Code
WASHINGTON	MO	63090

FEC ID number of contributing federal political committee.

C

Name of Employer  
GH TOOL & MOLD

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.123036**

Date of Receipt

MM / DD / YYYY  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GERARD HELLEBUSCH**

Mailing Address 143 COUNTRY RIDGE LN

City	State	Zip Code
WASHINGTON	MO	63090

FEC ID number of contributing federal political committee.

C

Name of Employer  
GH TOOL & MOLD

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

**Transaction ID : SA17A.123037**

Date of Receipt

MM / DD / YYYY  
07 / 29 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 719 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HANS HELMERICH**

Mailing Address 2945 E 27TH ST

City	State	Zip Code
TULSA	OK	74114

FEC ID number of contributing federal political committee.

C

Name of Employer  
HELMERICH & PAYNE, INC

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123039**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEA C HELMERICH**

Mailing Address 2945 E 27TH STREET

City	State	Zip Code
TULSA	OK	74114

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123041**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAWRENCE W HELMINIAK**

Mailing Address 6025 CANDLE COURT

City	State	Zip Code
SYKESVILLE	MD	21784

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123043**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 720 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

JOHN HELMKAMP

Mailing Address 4900 MANITOU TRAIL

City	State	Zip Code
GODFREY	IL	62035

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

Transaction ID : SA17A.123045

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

330.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

BILL HEMRICK

Mailing Address 236 GARDENRIDGE DR

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.123047

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

CHARLES HENDERSON

Mailing Address 9 SLEEPY HOLLOW LANE

City	State	Zip Code
NEWTOWN SQUARE	PA	19073

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
INSURANCE CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.123049

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1330.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 721 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES B HENDERSON**

Mailing Address 1195 LA MOREE RD SPC 34

City	State	Zip Code
SAN MARCOS	CA	92078

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.123050**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

20.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES B HENDERSON**

Mailing Address 1195 LA MOREE RD SPC 34

City	State	Zip Code
SAN MARCOS	CA	92078

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

**Transaction ID : SA17A.123051**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 02 / 2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES B HENDERSON**

Mailing Address 1195 LA MOREE RD SPC 34

City	State	Zip Code
SAN MARCOS	CA	92078

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

**Transaction ID : SA17A.123052**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 16 / 2015

Amount of Each Receipt this Period

20.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

65.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**GLORIA HENDERSON**

Mailing Address 16660 LEON TER

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
D & G INSULATION INC

Occupation  
INSULATION CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

**Transaction ID : SA17A.123053**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LEONARD HENDERSON**

Mailing Address 56 JUG HOLE RD

City	State	Zip Code
PROSPERITY	SC	29127

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HENDERSON & ASSOCIATES, INC

Occupation  
CONSULTING FORESTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123055**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARK HENDERSON**

Mailing Address 5750 NELSON DR

City	State	Zip Code
HUDSONVILLE	MI	49426

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NU-WOOL CO., INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123057**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK HENDERSON**

Mailing Address 5750 NELSON DR

City	State	Zip Code
HUDSONVILLE	MI	49426

FEC ID number of contributing federal political committee.

C

Name of Employer  
NU-WOOL CO., INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.123058**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN HENDERSON**

Mailing Address 7 MAKAN ROAD

City	State	Zip Code
MONROE	NY	10950

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123060**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS HENDRICKS**

Mailing Address 9112 CORAL COVE DRIVE

City	State	Zip Code
DALLAS	TX	75243

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123062**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ALLEN HENDRYX**

Mailing Address **PO BOX 191**

City State Zip Code  
**ROCK FALLS IL 61071**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.123064**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**400.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL HENKEL**

Mailing Address **69 W MINGES RD**

City State Zip Code  
**BATTLE CREEK MI 49015**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HENKEL CHRY JEEP**

Occupation  
**VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123066**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EVERETT HENNING**

Mailing Address **19706 HENNING RD**

City State Zip Code  
**KIEL WI 53042**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123068**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1650.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 725 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL HENRICHS**

Mailing Address 13403 EDGE WOOD LN

City HIGHLAND	State IL	Zip Code 62249
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123070**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL HENRICHS**

Mailing Address 13403 EDGE WOOD LN

City HIGHLAND	State IL	Zip Code 62249
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.123071**

Date of Receipt

**09 / 03 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARNER HENRY**

Mailing Address 800 W 6TH STREET, STE 310

City LOS ANGELES	State CA	Zip Code 90017
---------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE HENRY WIRE GROUP

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.123073**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WARNER HENRY**

Mailing Address 800 W 6TH STREET, STE 310

City	State	Zip Code
LOS ANGELES	CA	90017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE HENRY WIRE GROUP**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7900.00

**Transaction ID : SA17A.123074**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WARNER HENRY**

Mailing Address 800 W 6TH STREET, STE 310

City	State	Zip Code
LOS ANGELES	CA	90017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE HENRY WIRE GROUP**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5200.00

**Transaction ID : SA17A.123074.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

REATTRIBUTION TO CAROL HENRY

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL HENRY**

Mailing Address 800 W 6TH STREET, STE 310

City	State	Zip Code
LOS ANGELES	CA	90017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123074.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WARNER HENRY**

Mailing Address 800 W 6TH STREET, STE 310

City	State	Zip Code
LOS ANGELES	CA	90017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE HENRY WIRE GROUP**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123074.2**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WARNER HENRY**

Mailing Address 800 W 6TH STREET, STE 310

City	State	Zip Code
LOS ANGELES	CA	90017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE HENRY WIRE GROUP**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5200.00

**Transaction ID : SA17A.123074.3**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BILL E HENSON**

Mailing Address 300 SILVERCREEK CT

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SILVERPOINTE PROPERTIES**

Occupation  
**REAL ESTATE AGENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123076**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 728 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHRYN K HENTZEN**

Mailing Address 9728 N LAKE DRIVE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123078**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GAVIN HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.123080**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GAVIN HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123081**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

11200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 729 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GAVIN HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123082**

Date of Receipt

**07 / 06 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GAVIN HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123083**

Date of Receipt

**07 / 06 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NINETTA HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123085**

Date of Receipt

**07 / 06 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 730 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NINETTA HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123086**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NINETTA HERBERT**

Mailing Address 2301 SAN JOAQUIN HIL

City	State	Zip Code
CORONA DEL MA	CA	92625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123087**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN HERBSTITT**

Mailing Address 737 KEYSTONE AVENUE

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123089**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 731 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****SHIRLEY HERGE**

Mailing Address 4976 CHAMPIONSHIP CU

City	State	Zip Code
SPRING HILL	FL	34609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123091**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****JAMES HERICKHOFF**

Mailing Address 5123 E COUNTY ROAD 52

City	State	Zip Code
FORT COLLINS	CO	80524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123093**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****JEFFREY HERMAN**

Mailing Address 10002 AURORA AVENUE NORTH SUITE 36

City	State	Zip Code
SEATTLE	WA	98133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HERMAN LAW FIRM PLLCOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123095**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 732 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEVIN HERMENING**

Mailing Address 2245 COUNTY RD KK

City	State	Zip Code
MOSINEE	WI	54455

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FINANCIAL PLANNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.123097**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1350.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY HERNANDEZ**

Mailing Address 424 W RAVINE BAYE RD UNIT 4A

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
ABRAZO

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123099**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BENJAMIN H HERNDON**

Mailing Address 5709 BIRCHBROOK CIRCLE

City	State	Zip Code
GREENSBORO	NC	27410

FEC ID number of contributing federal political committee.

C

Name of Employer  
CLAYTON HOMES

Occupation  
FIELD OPERATIONS MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123101**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4300.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 733 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY HERRINGTON**

Mailing Address PO BOX 1856

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123103**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN HERSON**

Mailing Address 146 WHITNEY HILL RD

City	State	Zip Code
TUNBRIDGE	VT	05077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.123104**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN HERSON**

Mailing Address 146 WHITNEY HILL RD

City	State	Zip Code
TUNBRIDGE	VT	05077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

**Transaction ID : SA17A.123105**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2785.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 734 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN HERSON**

Mailing Address 146 WHITNEY HILL RD

City	State	Zip Code
TUNBRIDGE	VT	05077

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

**Transaction ID : SA17A.123106**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN HERSON**

Mailing Address 146 WHITNEY HILL RD

City	State	Zip Code
TUNBRIDGE	VT	05077

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

405.00

**Transaction ID : SA17A.123107**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERNARD R HERTEL**

Mailing Address 18320 TILTON LN

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

C

Name of Employer  
GROUP BENEFIT SERVICES INC

Occupation  
BENEFIT CONSUTLANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123109**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 735 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROGER HERTO**

Mailing Address 1040 5TH AVE

City  
NEW YORK

State Zip Code  
NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123111**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUSAN HERTO**

Mailing Address 1040 5TH AVE

City  
NEW YORK

State Zip Code  
NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
WRITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

**Transaction ID : SA17A.123113**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

2300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RENEE K HERZING**

Mailing Address 4090 N LAKE DRIVE

City  
SHOREWOOD

State Zip Code  
WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123115**

Date of Receipt

M M / D D / Y Y Y Y  
07 29 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 736 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RENEE K HERZING**

Mailing Address 4090 N LAKE DRIVE

City	State	Zip Code
SHOREWOOD	WI	53211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.123116**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT HESLEP**

Mailing Address 285 HANCOCK LANE

City	State	Zip Code
ATHENS	GA	30605

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123118**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN HESS**

Mailing Address 150 N. MAIN STREET

City	State	Zip Code
BOUNTIFUL	UT	84010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HESS TRAVEL

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123119**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 737 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD B HEWITT**

Mailing Address 2551 IVY ROAD

City	State	Zip Code
CHARLOTTESVIL	VA	22903

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SEMINOLE TRAIL PROPERTIES**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123121**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT J HEWITT**

Mailing Address PO BOX 400

City	State	Zip Code
VICTORIA	TX	77902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**OIL, GAS & INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123123**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL HEYER**

Mailing Address 3175 WATERFORD COURT

City	State	Zip Code
NEW BERLIN	WI	53151

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123125**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 738 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN HEYWOOD**

Mailing Address 12025 154TH PLACE NE

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123127**

Date of Receipt

**07** / **30** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN HEYWOOD**

Mailing Address 12025 154TH PLACE NE

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123127.0**

Date of Receipt

**07** / **30** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROCHELLE HEYWOOD**

Mailing Address 12025 154TH PL NE

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123127.1**

Date of Receipt

**07** / **30** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 739 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROD HIERONYMUS**

Mailing Address PO BOX 31279

City	State	Zip Code
OMAHA	NE	68131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TKC AEROSPACE

Occupation  
AIR TRAFFIC CONTROLLER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123129**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIM HIGGINS**

Mailing Address 909 CAMBRIDGE COURT

City	State	Zip Code
APPLETON	WI	54915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CHIRHO SERVICES

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123131**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN HIGHLANDER**

Mailing Address N74W28862 ZIMMERS XING

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
VIKING ELECTRIC SUPPLY

Occupation  
INDUSTRIAL SALES MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.123132**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

103.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

853.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 740 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN HIGHLANDER**

Mailing Address **N74W28862 ZIMMERS XING**

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**VIKING ELECTRIC SUPPLY**

Occupation  
**INDUSTRIAL SALES MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.123133**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM HILGEMANN**

Mailing Address **PO BOX 86**

City	State	Zip Code
STRATFORD	WI	54484

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**A&B PROCESS SYSTEMS CORP**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123135**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ARTHUR HILL**

Mailing Address **1675 BIRCH ST**

City	State	Zip Code
GREEN BAY	WI	54304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123137**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 741 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERALD HILL**

Mailing Address **3 TERRABELLA LANE**

City <b>HEATH</b>	State <b>TX</b>	Zip Code <b>75032</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123139**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFF HILL**

Mailing Address **104 REAGAN CT**

City <b>VENTURA</b>	State <b>CA</b>	Zip Code <b>93003</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123141**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS HILL**

Mailing Address **4841 WESTCHESTER DR**

**1**

City <b>AUSTINTOWN</b>	State <b>OH</b>	Zip Code <b>44515</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ERIC PETROLEUM CORPORATION**

Occupation  
**GENERAL COUNSEL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123142**

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1150.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 742 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM HILLEGASS**

Mailing Address 427 3RD STREET NORTH

City	State	Zip Code
JACKSONVILLE BEACH	FL	32250

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123144**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE M HILLENBRAN**

Mailing Address 330 MITCHELL AVE

City	State	Zip Code
BATESVILLE	IN	47006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123146**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE M HILLENBRAN**

Mailing Address 330 MITCHELL AVE

City	State	Zip Code
BATESVILLE	IN	47006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123147**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 743 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE HILLENBRAND**

Mailing Address **330 MITCHELL AVENUE**

City <b>BATESVILLE</b>	State <b>IN</b>	Zip Code <b>47006</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123149**

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JERRY HILLER**

Mailing Address **748 W LARAMIE LANE**

City <b>MILWAUKEE</b>	State <b>WI</b>	Zip Code <b>53217</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123151**

Date of Receipt

M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GENEVIEVE HILLIS**

Mailing Address **21 E HURON STREET, #1705**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60611</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DIRECT SUPPLY**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.123153**

Date of Receipt

M M / D D / Y Y Y Y
07 / 01 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**6900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 744 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GENEVIEVE HILLIS**

Mailing Address **21 E HURON STREET, #1705**

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DIRECT SUPPLY**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123153.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

SEE REATTRIBUTION BELOW

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN KOCINSKI**

Mailing Address **2510 N 90TH STREET**

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123153.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JENNIFER F HILLIS**

Mailing Address **951 E WYE LANE**

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123155**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 745 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN HINCHLIFFE**

Mailing Address 3344 DAKOTA WAY

City	State	Zip Code
LAS VEGAS	NV	89169

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123157**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EVELYN HINE**

Mailing Address 25702 APACHE CREEK

City	State	Zip Code
SAN ANTONIO	TX	78260

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128898**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GILBERT HINE**

Mailing Address 25702 APACHE CREEK

City	State	Zip Code
SAN ANTONIO	TX	78260

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123159**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 746 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GILBERT HINE**

Mailing Address 25702 APACHE CREEK

City	State	Zip Code
SAN ANTONIO	TX	78260

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128896**

Date of Receipt

**08 / 01 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LARRY W HINES**

Mailing Address 335 W CIRCLE DR

City	State	Zip Code
MUSKEGON	MI	49445

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HINES CORPORATION

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123161**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELMER HINKLE**

Mailing Address 13251 BODEGA TRAIL

City	State	Zip Code
FRISCO	TX	75035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123163**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 747 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HARRY HINKLE**

Mailing Address 3875 LINDSEY RD. NE

City	State	Zip Code
MARIETTA	GA	30067

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123165**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DUSTIN HINTON**

Mailing Address W132 N6475 MARACH

City	State	Zip Code
MENOMONEE FALLS	WI	53051

FEC ID number of contributing federal political committee.

C

Name of Employer  
UNITED HEALTHCARE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123167**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAREN HIRN**

Mailing Address 334 E 1ST ST

City	State	Zip Code
GENOA	IL	60135

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123169**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 748 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MORDECHA HIRSCH**

Mailing Address 152 STRATFORD PL.

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123171**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MORDECHA HIRSCH**

Mailing Address 152 STRATFORD PL.

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123172**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MORDECHA HIRSCH**

Mailing Address 152 STRATFORD PL.

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123173**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 749 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY HIRT**

Mailing Address 3813 SE 21ST PLACE

City	State	Zip Code
CAPE CORAL	FL	33904

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123175**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GRACE HIRTE**

Mailing Address 1014 RACINE ST.

City	State	Zip Code
DELAVER	WI	53115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DELAVER CHRISTIAN SCHOOL

Occupation  
ADMINISTRATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123176**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RUSSELL HISSOM**

Mailing Address 6930 DONNYBILL ROAD

City	State	Zip Code
DEFOREST	WI	53532

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BAKER TILLY

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123178**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 750 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PHILIP HIXON**

Mailing Address **24 SPYGLASS CIRCLE**

City	State	Zip Code
RANCHO MIRAGE	CA	92270

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123180**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAN HL**

Mailing Address **W285N3440 CONSERVANC**

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NOBLE MEDICAL, INC.**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123182**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WADE HOBBS**

Mailing Address **5713 MONALEE AVE**

City	State	Zip Code
SACRAMENTO	CA	95819

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FED HIGHWAY ADMIN**

Occupation  
**CIVIL SERVICE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123184**

Date of Receipt

**07 / 26 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 751 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN HOCHBERGER**

Mailing Address 6311 KIRK STREET

City  
WESTON

State Zip Code  
WI 54476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123186**

Date of Receipt

M M / D D / Y Y Y Y  
08 12 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD HOCHMAN**

Mailing Address 225 EAST 57TH STREET

City  
NEW YORK

State Zip Code  
NY 10022-2822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123187**

Date of Receipt

M M / D D / Y Y Y Y  
07 21 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE HODGES**

Mailing Address 6533 ORLAND ST

City  
FALLS CHURCH

State Zip Code  
VA 22043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123189**

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 752 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED HODGES**

Mailing Address **240 TUCKAHOE LN**

City	State	Zip Code
MEMPHIS	TN	38117

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123191**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LARRY HOEDL**

Mailing Address **5006 SHELLYE COURT**

City	State	Zip Code
ORLANDO	FL	32807

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123193**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD HOENER**

Mailing Address **9641 LEE BLVD**

City	State	Zip Code
LEAWOOD	KS	66206

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123195**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 753 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID HOFF**

Mailing Address **PO BOX 370**

City State Zip Code  
**WOODY CREEK CO 81656**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123197**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES HOFFA**

Mailing Address **1800 TRANSPORT AVE**

City State Zip Code  
**MEMPHIS TN 38116**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WEST TENNESSEE ORNAMENTAL DOOR**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123198**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD HOFFMANN**

Mailing Address **4145 LONGKNIFE ROAD**

City State Zip Code  
**RENO NV 89519**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123200**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 754 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD HOFFMANN**

Mailing Address 4145 LONGKNIFE ROAD

City	State	Zip Code
RENO	NV	89519

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123201**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANET HOGAN**

Mailing Address 2510 N 90TH STREET

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128689**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK HOGAN**

Mailing Address 2510 N 90TH STREET

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing federal political committee.

C

Name of Employer  
BMO HARRIS BANK

Occupation  
BANKING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123203**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 755 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK HOGAN**

Mailing Address **2510 N 90TH STREET**

City <b>WAUWATOSA</b>	State <b>WI</b>	Zip Code <b>53226</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BMO HARRIS BANK**

Occupation  
**BANKING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128687**

Date of Receipt

**07 / 01 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK HOLAIN**

Mailing Address **N2491 CHIANTI COURT**

City <b>LAKE GENEVA</b>	State <b>WI</b>	Zip Code <b>53147</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123205**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH HOLBERT**

Mailing Address **130 LAUREL**

City <b>SMYRNA</b>	State <b>TN</b>	Zip Code <b>37167</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123207**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 756 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD HOLDER**

Mailing Address PO BOX 4190

City	State	Zip Code
MIDWAY	KY	40347

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123209**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK W HOLIAN**

Mailing Address N2491 CHIANTI CT

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOLIAN INSULATION COMPANY

Occupation  
VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123211**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN HOLLANDER**

Mailing Address 3723 RUNNYMEDE DRIVE

City	State	Zip Code
SAINT CHARLES	MO	63301

FEC ID number of contributing federal political committee.

C

Name of Employer  
S J HOLLANDER ARCHITECT

Occupation  
ARCHITECT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123212**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

525.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 757 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD HOLMBERG**

Mailing Address 1224 RICHMOND LANE

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing federal political committee.

C

Name of Employer  
GCM GROSVENOR

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123217**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

350.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**E. HOLROYDE**

Mailing Address 1 ACACIA DRIVE

City	State	Zip Code
BEL TIBURON	CA	94920

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123219**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS HOLSINGER**

Mailing Address 340 NORTH AVENUE

City	State	Zip Code
TURLOCK	CA	95382

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123221**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		19		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 758 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ALYN HOLT**

Mailing Address **10 HESSIAN WAY**

City State Zip Code  
**CHERRY HILL NJ 08003**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INTEST CORP**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**3000.00**

**Transaction ID : SA17A.123223**

Date of Receipt

**07 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**3000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ALYN HOLT**

Mailing Address **10 HESSIAN WAY**

City State Zip Code  
**CHERRY HILL NJ 08003**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INTEST CORP**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123223.0**

Date of Receipt

**07 / 14 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-300.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CONNIE HOLT**

Mailing Address **10 HESSIAN WAY**

City State Zip Code  
**CHERRY HILL NJ 08003**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123223.1**

Date of Receipt

**07 / 14 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**300.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 759 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KRISTIN HOLZMAN**

Mailing Address **2567 IVY CREEK FARM ROA**

City	State	Zip Code
CHARLOTTESVIL	VA	22903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PRINCE MICHAEL WINERY**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123225**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALD HOMMES**

Mailing Address **6180 LANEWOOD LANE**

City	State	Zip Code
PLYMOUTH	MN	55446

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123227**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JON HOMSTAD**

Mailing Address **6825 GRENADIER BLVD APT**

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123229**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 760 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN HONEYCUTT**

Mailing Address 2881 PENNYROYAL DR

City	State	Zip Code
CHICO	CA	95928

FEC ID number of contributing federal political committee.

C

Name of Employer  
GUILLON INC.

Occupation  
CONSTRUCTION MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123230**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HAROLD S HOOK**

Mailing Address 101 WESTCOTT ST

City	State	Zip Code
HOUSTON	TX	77007

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123232**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFF HOOK**

Mailing Address 1007 EAGLE RIDGE DRIVE

City	State	Zip Code
FINDLAY	OH	45840

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123234**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3025.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 761 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD HOOPER**

Mailing Address 12172 TRYTON WAY

City	State	Zip Code
RESTON	VA	20190

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COMPUTER SCIENCES CORPORATION**

Occupation  
**SENIOR MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123236**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN B HOOVER**

Mailing Address 14753 WEXHALL TER

City	State	Zip Code
BURTONSVILLE	MD	20866

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123238**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SAMUEL N HOPE**

Mailing Address 6432 UPPER PKWY N

City	State	Zip Code
WAUWATOSA	WI	53213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOPE DISPENSING SYSTEMS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123240**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 762 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID HORAK**

Mailing Address **1821 W REID DRIVE**

City **APPLETON** State **WI** Zip Code **54914**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RADIOLOGY ASSOCIATES OF FOX VALLEY**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123242**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD D HORAK**

Mailing Address **1908 HARBOURSIDE DRIVE**

City **LONGBOAT KEY** State **FL** Zip Code **34228**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123244**

Date of Receipt

**09 / 03 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALLEN HORD**

Mailing Address **1662 MONTCLIFF CT**

City **DECATUR** State **GA** Zip Code **30033**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PHYSICIAN**

Occupation  
**ASPC**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123246**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 763 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALLEU HORD**

Mailing Address 1662 MOUNTCLIFF COURT

City	State	Zip Code
DECATUR	GA	30033

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ALLANCE SPINE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123248**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RUBLE HORD**

Mailing Address 131 RUNNING PNE

City	State	Zip Code
RICHMOND	VA	23238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NORTHWESTERN MUTUAL**

Occupation  
**FINANCIAL REPRESENTATIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.123250**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

253.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GAY HORN**

Mailing Address 373 HORN LN

City	State	Zip Code
AUSTIN	AR	72007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123251**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1003.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 764 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICK T HORNE**

Mailing Address 20300 WATER TOWER BL

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123253**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL HORNUNG**

Mailing Address 411 N PINE HILL ROAD

City	State	Zip Code
GRIFFIN	GA	30223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ZIA, INC

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123254**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL HORNUNG**

Mailing Address 411 N PINE HILL ROAD

City	State	Zip Code
GRIFFIN	GA	30223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ZIA, INC

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123255**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 765 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL HORNUNG**

Mailing Address 411 N PINE HILL ROAD

City	State	Zip Code
GRIFFIN	GA	30223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ZIA, INC

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123256**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOROWITZ MANAGEMENT INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.123258**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOROWITZ MANAGEMENT INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123258.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REATTRIBUTION TO MICHELLE HOROWITZ

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 766 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHELLE HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.123258.1**

Date of Receipt

**07** / **06** / **2015**

REATTRIBUTION FROM DAVID HOROWITZ; SEE  
REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHELLE HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.123258.2**

Date of Receipt

**07** / **06** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHELLE HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.123258.3**

Date of Receipt

**07** / **06** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 767 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOROWITZ MANAGEMENT INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123258.4**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOROWITZ MANAGEMENT INC

Occupation  
PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123258.5**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHELLE HOROWITZ**

Mailing Address 27241 LA PAZ RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123263**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REATTRIBUTED

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 768 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALAN HORWITZ**

Mailing Address 210 W RITTENHOUSE SQUARE #1806

City	State	Zip Code
PHILADELPHIA	PA	19103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAMPUS APARTMENTS**

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123267**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN HORWITZ**

Mailing Address 210 W RITTENHOUSE SQUARE #1806

City	State	Zip Code
PHILADELPHIA	PA	19103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAMPUS APARTMENTS**

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128894**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN HORWITZ**

Mailing Address 210 W RITTENHOUSE SQUARE #1806

City	State	Zip Code
PHILADELPHIA	PA	19103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAMPUS APARTMENTS**

Occupation  
N/A

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128895**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 769 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY HOSKING**

Mailing Address 6743 N OMIGISI BEACH RD

City	State	Zip Code
NORTHPORT	MI	49670

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.123269**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM HOSKINS**

Mailing Address 27 HARVEST CIRCLE

City	State	Zip Code
LINCOLN	MA	01773

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123271**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHIRLEY HOST**

Mailing Address 26670 ROOKERY LAKE DRIVE

City	State	Zip Code
BONITA SPRINGS	FL	34134

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123273**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3153.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 770 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM HOTALING**

Mailing Address 125 QUASSAICK AVE

City	State	Zip Code
NEW WINDSOR	NY	12553

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123275**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALD HOULIHAN**

Mailing Address 1912 CREEK DRIVE

City	State	Zip Code
SAN JOSE	CA	95125

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MOH LAW

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123280**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AUBRY HOUNSHELL**

Mailing Address 11237 EXMOOR DRIVE

City	State	Zip Code
CONCORD TOWNS	OH	44077

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123282**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 771 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLE HOUSTON**

Mailing Address W250N4937 WILLIAM DR

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123284**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**REAGAN HOUSTON**

Mailing Address PO BOX 790390

City	State	Zip Code
SAN ANTONIO	TX	78279

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123286**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT HOUSTON**

Mailing Address 104 JAMES CT.

City	State	Zip Code
CHOCOWINITY	NC	27817

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123288**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 772 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS HOUSTON**

Mailing Address **5252 QUEMAZON**

City	State	Zip Code
LOS ALAMOS	NM	87544

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123290**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ALMEDA HOWARD**

Mailing Address **537 WINDCHASE LN**

City	State	Zip Code
STONE MOUNTAIN	GA	30083

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HAWKINS PARNELL THACKSTON &  
YOUNG LLP**

Occupation  
**PARALEGAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.123291**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTIN HOWARD**

Mailing Address **930 DOUGLASS DRIVE**

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123293**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

535.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 773 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN HOWARD**

Mailing Address PO BOX 1527

City	State	Zip Code
SAN DIEGO	CA	92067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123295**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL HOWARD**

Mailing Address 715 E 12TH AVE

City	State	Zip Code
SPOKANE	WA	99202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123297**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RANDAL HOWARD**

Mailing Address N5W31657 HUCKLEBERRY WAY S

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123299**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 774 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD D. HOWARD**

Mailing Address **1540 SOUTH KING STREET**

City <b>HONOLULU</b>	State <b>HI</b>	Zip Code <b>96826</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123301**

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HARRY HOWE**

Mailing Address **316 OXFORD ST**

City <b>ROCHESTER</b>	State <b>NY</b>	Zip Code <b>14607</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123303**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD L HOWELL**

Mailing Address **4375 CLEAR LAKES RD**

City <b>BUHL</b>	State <b>ID</b>	Zip Code <b>83316</b>
---------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**R & B HOWELL INC.**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123305**

Date of Receipt

M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 775 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANTHONY HOYDILLA**

Mailing Address 350 SPRING STREET

City	State	Zip Code
MERIDEN	CT	06451

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123307**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHARON S HSU**

Mailing Address 806 ORIOLE LANE

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HSU'S GINSENG ENTERPRIS

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123309**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAREN HUBBARD**

Mailing Address 2289 RIVER ROAD SOUTH

City	State	Zip Code
LAKELAND	MN	55043

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HUBBARD BROADCASTING INC

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123311**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

9100.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN HUBBARD**

Mailing Address 2289 RIVER ROAD SOUTH

City	State	Zip Code
LAKELAND	MN	55043

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HUBBARD BROADCASTING INC

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123312**

Date of Receipt

MM / DD / YYYY  
08 / 24 / 2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAREN HUBBARD**

Mailing Address 2289 RIVER ROAD SOUTH

City	State	Zip Code
LAKELAND	MN	55043

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HUBBARD BROADCASTING INC

Occupation  
DIRECTOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123313**

Date of Receipt

MM / DD / YYYY  
08 / 24 / 2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RUTH E HUBBARD**

Mailing Address 5155 MIAMI RD

City	State	Zip Code
CINCINNATI	OH	45243

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123315**

Date of Receipt

MM / DD / YYYY  
08 / 11 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

250.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 777 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STANLEY S HUBBARD**

Mailing Address 3415 UNIVERSITY AVENUE

City	State	Zip Code
SAINT PAUL	MN	55114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HUBARD BROADCASTING INC

Occupation  
BROADCAST EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123317**

Date of Receipt

**08 / 24 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STANLEY S HUBBARD**

Mailing Address 3415 UNIVERSITY AVENUE

City	State	Zip Code
SAINT PAUL	MN	55114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HUBARD BROADCASTING INC

Occupation  
BROADCAST EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123318**

Date of Receipt

**08 / 24 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STANLEY S HUBBARD**

Mailing Address 3415 UNIVERSITY AVENUE

City	State	Zip Code
SAINT PAUL	MN	55114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HUBARD BROADCASTING INC

Occupation  
BROADCAST EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123319**

Date of Receipt

**08 / 24 / 2015**

REDESIGATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 778 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL HUBER**

Mailing Address 5 ROSEBANK LN

City	State	Zip Code
HILTON HEAD	SC	29928

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123320**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL HUBER**

Mailing Address 5 ROSEBANK LN

City	State	Zip Code
HILTON HEAD	SC	29928

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123321**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GLADYS HUBER**

Mailing Address 707 W PIONEER RD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123323**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

525.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 779 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**GLADYS HUBER**

Mailing Address 707 W PIONEER RD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : SA17A.123324**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			02			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MORTIMER G HUBER**

Mailing Address 404 S VINE AVE

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENEVA INVESTMENT MANAGEMENT  
LLC

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123326**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			18			2015			

Amount of Each Receipt this Period

225.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TERRY HUCTION**

Mailing Address 2121 KIRBY DR  
UNIT 6NE / #18

City	State	Zip Code
HOUSTON	TX	77019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123328**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1325.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 780 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRY HUCTION**

Mailing Address 2121 KIRBY DR  
UNIT 6NE / #18

City HOUSTON State TX Zip Code 77019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.123329**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS HUCKLE**

Mailing Address 503 HARRIS TRL

City CADILLAC State MI Zip Code 49601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123331**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARREN HUDAK**

Mailing Address PO BOX 336

City NEW CUMBERLND State PA Zip Code 17070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUDAK & COMPANY, LLC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.123333**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2015

Amount of Each Receipt this Period

260.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1510.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 781 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID P HUDSON**

Mailing Address 3661 SEQUOIA TRL

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIDDLETON FORD**

Occupation  
**VICE PRESIDENT/OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123335**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**A. W HUELSMAN**

Mailing Address PO BOX 467

City	State	Zip Code
WAUKESHA	WI	53187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123337**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEL HUENNEKENS**

Mailing Address 18804 NE 121ST ST

City	State	Zip Code
BRUSH PRAIRIE	WA	98606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**BUSINESS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123338**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1325.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 782 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD HUGHES**

Mailing Address 6 DELLWOOD CT

City	State	Zip Code
COCKEYSVILLE	MD	21030

FEC ID number of contributing federal political committee.

C

Name of Employer  
CAMDEN PARTNERS

Occupation  
MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123340**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LOUIS HUGHES**

Mailing Address 86 INDIAN HILL ROAD

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
VENTURE CAPITALIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123342**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LOUIS HUGHES**

Mailing Address 86 INDIAN HILL ROAD

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
VENTURE CAPITALIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.123343**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1100.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 783 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LOUIS HUGHES**

Mailing Address 86 INDIAN HILL ROAD

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
VENTURE CAPITALIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.123344**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARLON HUGHES**

Mailing Address 201 BLACKBERRY

City	State	Zip Code
MIDLAND	TX	79705

FEC ID number of contributing federal political committee.

C

Name of Employer  
SOUTHWEST MEDICAL IMAGING

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123346**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM HUGHES**

Mailing Address 10 WIMBLY PL

City	State	Zip Code
SAINT CHARLES	MO	63301

FEC ID number of contributing federal political committee.

C

Name of Employer  
T R HUGHES HOMES

Occupation  
HOME BUILDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123348**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 784 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HEIDI A HUIZENGA**

Mailing Address **2215 YORK ROAD, SUITE 5**

City	State	Zip Code
OAK BROOK	IL	60523

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123350**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN HULBERT**

Mailing Address **11404 NORTHWIND CT**

City	State	Zip Code
RESTON	VA	20194

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123352**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM HULETT**

Mailing Address **365 LAKESHORE DR**

City	State	Zip Code
MADISON	MS	39110

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JACKSON ANESTHESIA ASSOCIATE**

Occupation  
**ANESTHESIOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123354**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUDITH L HUMAN**

Mailing Address P.O. BOX 339

City

LANCASTER

State

MO

Zip Code

63548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

205.00

**Transaction ID : SA17A.123355**

Date of Receipt

M M / D D / Y Y Y Y

08

11

2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM HUME**

Mailing Address 600 MONTGOMERY STREET, 28TH FLOOR

City

SAN FRANCISCO

State

CA

Zip Code

94111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BASIC AMERICAN FOODS

Occupation

OWNER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123357**

Date of Receipt

M M / D D / Y Y Y Y

07

10

2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID HUMPHREYS**

Mailing Address PO BOX 4050

City

JOPLIN

State

MO

Zip Code

64803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tamko Building Products Inc

Occupation

President & CEO

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123359**

Date of Receipt

M M / D D / Y Y Y Y

08

05

2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8175.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID HUMPHREYS**

Mailing Address PO BOX 4050

City State Zip Code  
JOPLIN MO 64803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Tamko Building Products Inc

Occupation  
President & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128891**

Date of Receipt

M M / D D / Y Y Y Y  
08 05 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEBRA HUMPHREYS**

Mailing Address PO BOX 4050

City State Zip Code  
JOPLIN MO 64803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Tamko Building Products Inc

Occupation  
President & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128893**

Date of Receipt

M M / D D / Y Y Y Y  
08 05 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL A HUNDT**

Mailing Address 1705 NOTRE DAME BLVD

City State Zip Code  
ELM GROVE WI 53122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123360**

Date of Receipt

M M / D D / Y Y Y Y  
07 14 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 787 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL A HUNDT**

Mailing Address 1705 NOTRE DAME BLVD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123361**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CELIA HUNG**

Mailing Address 67667 HWY 20

City	State	Zip Code
BEND	OR	97703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ICM RESOURCES INC.

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123363**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROLINE ROSE HUNT**

Mailing Address 2101 CEDAR SPRING ROAD, SUITE 1600

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Rosewood Corp

Occupation  
Investments

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123365**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 788 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL HUNT**

Mailing Address 9702 BURLESON DR.

City	State	Zip Code
DALLAS	TX	75243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WGV

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123367**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN HUNT**

Mailing Address 1505 CRYSTAL DR, #707

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.123368**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN HUNT**

Mailing Address 1505 CRYSTAL DR, #707

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.123369**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY B HUNTER**

Mailing Address 4756 JOHN SCOTT DR

City	State	Zip Code
LYNCHBURG	VA	24503

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123371**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			09			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID HUPER**

Mailing Address 60455 120TH STREET

City	State	Zip Code
ALDEN	MN	56009

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.123373**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL F HUPY**

Mailing Address 3340 N WINDERMERE CT

City	State	Zip Code
MILWAUKEE	WI	53211

FEC ID number of contributing federal political committee.

C

Name of Employer  
HUPY & ABRAHAM, SC

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123375**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

970.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 790 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL F HUPY**

Mailing Address 3340 N WINDERMERE CT

City	State	Zip Code
MILWAUKEE	WI	53211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HUPY & ABRAHAM, SC

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.123376**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RHONDA HURLEY**

Mailing Address 4621 HOLT ST

City	State	Zip Code
BELLAIRE	TX	77401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123377**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHELIA HURST**

Mailing Address 16025 SE 149TH ST

City	State	Zip Code
RENTON	WA	98059

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123378**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 791 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTOP J HUSSIN**

Mailing Address 29 FULLER DRIVE

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123380**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**D B HUTCHISON**

Mailing Address 5530 STRAND  
UNIT 302

City	State	Zip Code
HAWTHORNE	CA	90250

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123381**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J ROBERT HUTCHISON**

Mailing Address 740 EL PARQUE

City	State	Zip Code
EL PASO	TX	79912

FEC ID number of contributing federal political committee.

C

Name of Employer  
QUALITY FRUIT & VEG. CO.

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123383**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 792 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL HUTCHISON**

Mailing Address 32 MARCIA RD

City	State	Zip Code
WILMINGTON	MA	01887

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CELESTICA

Occupation  
DIRECTOR, QUALITY/TESTING, MEDIC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123385**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVE HUTTON**

Mailing Address 1225 E 6TH ST

City	State	Zip Code
MOSCOW	ID	83843

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SHORT'S FUNERAL CHAPEL

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123387**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVE HUTTON**

Mailing Address 1225 E 6TH ST

City	State	Zip Code
MOSCOW	ID	83843

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SHORT'S FUNERAL CHAPEL

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123388**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 793 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUNGKOOK HWANG**

Mailing Address 26 TRAFALGAR ROAD

City	State	Zip Code
TENAFLY	NJ	07670

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ARCHEGOS CAPITAL MANAGEMENT

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123390**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD HYATT**

Mailing Address 1111 HUMMINGBIRD LN

City	State	Zip Code
ADKINS	TX	78101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123392**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAWRENCE HYATT**

Mailing Address 253 KESWICK GROVE LANE

City	State	Zip Code
FRANKLIN	TN	37067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CRACKER BARREL OLD COUNTRY  
STORE INC

Occupation  
CHIEF FINANCIAL OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123394**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 794 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDD HYDE**

Mailing Address 2131 INVERNESS LN

City	State	Zip Code
BERWYN	PA	19312

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RADNOR FINANCIAL ADVISORS, I

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123396**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LYSA HYNES**

Mailing Address 28495 BALLARD DRIVE

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Colborne

Occupation  
Director

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123398**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREI IANCU**

Mailing Address 237 WOODRUFF AVE

City	State	Zip Code
LOS ANGELES	CA	90024

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
IRELL & MANELLA LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123400**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANDREI IANCU**

Mailing Address **237 WOODRUFF AVE**

City

**LOS ANGELES**

State

**CA**

Zip Code

**90024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**IRELL & MANELLA LLP**

Occupation

**ATTORNEY**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123401**

Date of Receipt

**07**

**06**

**2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**



Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LUIZA IANCU**

Mailing Address **237 WOODRUFF AVE**

City

**LOS ANGELES**

State

**CA**

Zip Code

**90024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**KAISER PERMANENTE**

Occupation

**PHYSICIAN**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123403**

Date of Receipt

**07**

**06**

**2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**



Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALLEN ICET**

Mailing Address **2055 SHEPHERDIA DRIVE**

City

**ANCHORAGE**

State

**AK**

Zip Code

**99508**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**BP**

Occupation

**ENGINEER**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123405**

Date of Receipt

**07**

**29**

**2015**

Amount of Each Receipt this Period

**1000.00**



Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANTHONY R IGNACZAK**

Mailing Address 2215 BLUE RIDGE LANE

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing federal political committee.

C

Name of Employer  
Quad-C Management Inc

Occupation  
President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123407**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 28 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DARYL INGALSBE**

Mailing Address 9201 N SHORE DR

City	State	Zip Code
SPICER	MN	56288

FEC ID number of contributing federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123409**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 23 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID INGALSBE**

Mailing Address 29072 COUNTY ROAD 20

City	State	Zip Code
PAYNESVILLE	MN	56362

FEC ID number of contributing federal political committee.

C

Name of Employer  
ITC

Occupation  
CEO/SDI DIVISION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123410**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 29 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 797 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ORRIN H INGRAM**

Mailing Address 1475 MORAN RD

City

FRANKLIN

State

TN

Zip Code

37069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INGRAM INDUSTRIES

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123412**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CONSTANT IORDANOU**

Mailing Address 102 HORSESHOE RD

City

MILL NECK

State

NY

Zip Code

11765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

PRES

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123414**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARIANNE IORDANOU**

Mailing Address 102 HORSESHOE RD

City

MILL NECK

State

NY

Zip Code

11765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OUR LADY OF MERCY ACADEMY

Occupation

BOARD OF DIRECTORS

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123416**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 798 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MOUKADDAS IOULDACHEVA**

Mailing Address 17 HIGH PT RD

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123418**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES IRBY**

Mailing Address 1817 TYNE BLVD

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
IRBY INVESTMENTS, LLC

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.123420**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

3000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES IRBY**

Mailing Address 1817 TYNE BLVD

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
IRBY INVESTMENTS, LLC

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123420.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-300.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 799 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES IRBY**

Mailing Address 1817 TYNE BLVD

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
IRBY INVESTMENTS, LLC

Occupation  
INVESTOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.123420.1**

Date of Receipt

**07** / **24** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 7/24/2015

Amount of Each Receipt this Period

300.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD IRICK**

Mailing Address 147 BARBER FARM RD

City	State	Zip Code
JERICHO	VT	05465

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Advanced Welding Institute

Occupation  
Business Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123422**

Date of Receipt

**07** / **17** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD IRVING**

Mailing Address 15615 OAKRIDGE COURT

City	State	Zip Code
MORGAN HILL	CA	95037

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RICHARD IRVING

Occupation  
VENTURE CAPITALIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123424**

Date of Receipt

**07** / **29** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 800 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL J ISAAC**

Mailing Address **75 PROSPECT AVE**

City	State	Zip Code
LARCHMONT	NY	10538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ARBITER PARTNERS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123426**

Date of Receipt

**07 / 02 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL J ISAAC**

Mailing Address **75 PROSPECT AVE**

City	State	Zip Code
LARCHMONT	NY	10538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ARBITER PARTNERS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.123427**

Date of Receipt

**07 / 28 / 2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL J ISAAC**

Mailing Address **75 PROSPECT AVE**

City	State	Zip Code
LARCHMONT	NY	10538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ARBITER PARTNERS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123427.0**

Date of Receipt

**07 / 28 / 2015**

REATTRIBUTION TO KAREN ISAAC

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN ISAAC**

Mailing Address **75 PROSPECT AVENUE**

City	State	Zip Code
LARCHMONT	NY	10538

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123427.1**

Date of Receipt

**07** / **28** / **2015**

REATTRIBUTION FROM PAUL ISAAC

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL J ISAAC**

Mailing Address **75 PROSPECT AVE**

City	State	Zip Code
LARCHMONT	NY	10538

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ARBITER PARTNERS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123427.2**

Date of Receipt

**07** / **28** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL J ISAAC**

Mailing Address **75 PROSPECT AVE**

City	State	Zip Code
LARCHMONT	NY	10538

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ARBITER PARTNERS**

Occupation  
**CEO**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123427.3**

Date of Receipt

**07** / **28** / **2015**

REDESIGNATION FROM PRIMARY; REFUND ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JON ISAACS**

Mailing Address 992 S 4TH AVE

City	State	Zip Code
BRIGHTON	CO	80601

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
NATURAL RESOURCES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123431**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JON ISAACS**

Mailing Address 992 S 4TH AVE

City	State	Zip Code
BRIGHTON	CO	80601

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
NATURAL RESOURCES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.123434**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

750.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JON ISAACS**

Mailing Address 992 S 4TH AVE

City	State	Zip Code
BRIGHTON	CO	80601

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
NATURAL RESOURCES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.123432**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1350.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 803 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL ISBELL**

Mailing Address 5815 SLATESTONE RD

City	State	Zip Code
WASHINGTON	NC	27889

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

318.00

**Transaction ID : SA17A.123435**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

118.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID ISKOWICH**

Mailing Address 242 GREENLEAF AVENUE

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing federal political committee.

C

Name of Employer  
State of IL

Occupation  
Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123437**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MORTON ISRAEL**

Mailing Address 18901 PATRICIAN DR

City	State	Zip Code
VILLA PARK	CA	92861

FEC ID number of contributing federal political committee.

C

Name of Employer  
DR. MORTON ISRAEL

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123439**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

618.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 804 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARC IVERSON**

Mailing Address 5200 BEVINGTON PLACE

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123441**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARC IVERSON**

Mailing Address 5200 BEVINGTON PLACE

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.123442**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARC IVERSON**

Mailing Address 5200 BEVINGTON PLACE

City	State	Zip Code
CHARLOTTE	NC	28277

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

**Transaction ID : SA17A.123443**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 805 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HERCULANO IZQUIERDO**

Mailing Address **69 RAVENS RIDGE ROAD**

City	State	Zip Code
SANTA FE	NM	87505

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123445**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES C JABLECKI**

Mailing Address **PO BOX 2088**

City	State	Zip Code
LA JOLLA	CA	92038

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123447**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEROME JACALONE**

Mailing Address **433 E 51ST ST**  
**8**

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123449**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 806 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER JACK**

Mailing Address 106 OLD CABIN LANE

City State Zip Code  
KERNERSVILLE NC 27284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123450**

Date of Receipt

M M / D D / Y Y Y Y  
08 31 2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HUGH B JACKS**

Mailing Address 510 CARNOUSTIE

City State Zip Code  
SHOAL CREEK AL 35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123452**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AARON JACKSON**

Mailing Address 9225 W CHARLESTON BLVD #1259

City State Zip Code  
LAS VEGAS NV 89117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED HEALTHCARE

Occupation  
DIRECTOR, NETWORK CONTRACTING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123454**

Date of Receipt

M M / D D / Y Y Y Y  
07 18 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

775.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 807 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABETH JACKSON**

Mailing Address 169 KINGFISHER CIR

City	State	Zip Code
POOLER	GA	31322

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.123455**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABETH JACKSON**

Mailing Address 169 KINGFISHER CIR

City	State	Zip Code
POOLER	GA	31322

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123456**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J. L. JACKSON**

Mailing Address 4500 ROLAND AVE, 605

City	State	Zip Code
DALLAS	TX	75219

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123458**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

675.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 808 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN E JACKSON**

Mailing Address 510 N LIBERTY ST

City	State	Zip Code
HOBART	IN	46342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

353.00

**Transaction ID : SA17A.123459**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2015			

Amount of Each Receipt this Period

153.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN JACKSON**

Mailing Address 114 GRAYS CREEK DRIVE

City	State	Zip Code
SAVANNAH	GA	31410

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123461**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHELLEY JACKSON**

Mailing Address 2455 E 27TH PL

City	State	Zip Code
TULSA	OK	74114

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123463**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1653.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 809 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVE JACKSON**

Mailing Address 712 S MAIN ST

City	State	Zip Code
THREE RIVERS	MI	49093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANDSCAPE FORMS

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123465**

Date of Receipt

MM / DD / YYYY  
08 / 03 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WES JACKSON**

Mailing Address 17423 WILD ROSE TRAIL

City	State	Zip Code
CYPRESS	TX	77429

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123467**

Date of Receipt

MM / DD / YYYY  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM S JACKSON**

Mailing Address 105 CLUB FOREST LN

City	State	Zip Code
GREENVILLE	SC	29605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTEL

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123469**

Date of Receipt

MM / DD / YYYY  
07 / 24 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 810 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM S JACKSON**

Mailing Address 105 CLUB FOREST LN

City	State	Zip Code
GREENVILLE	SC	29605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTEL

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.123470**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD JACOBS**

Mailing Address 884 NORFOLK PINE AVE

City	State	Zip Code
SUNNYVALE	CA	94087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BROADCOM

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123472**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RUTH JACOBS**

Mailing Address 935 BEACON SQUARE CT # 38

City	State	Zip Code
GAITHERSBURG	MD	20878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123474**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 811 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER JACOBSON**

Mailing Address 1515 W HURON DRIVE

City	State	Zip Code
SANTA ANA	CA	92706

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOROWITZ MANAGEMENT

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123476**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER JACOBSON**

Mailing Address 1515 W HURON DRIVE

City	State	Zip Code
SANTA ANA	CA	92706

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOROWITZ MANAGEMENT

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123477**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

2200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GAYLE JACOBSON**

Mailing Address 1515 W HURON DRIVE

City	State	Zip Code
SANTA ANA	CA	92706

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123479**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 812 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEAN M JACOBSON**

Mailing Address 6119 HEG PARK

City	State	Zip Code
WIND LAKE	WI	53185

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123481**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT E JACOBY**

Mailing Address 8 SPRINGHOUSE RD

City	State	Zip Code
SLOATSBURG	NY	10974

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123483**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT JACOBY**

Mailing Address 3080 TIMBERLAKE PT

City	State	Zip Code
PONTE VEDRA B	FL	32082

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123485**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			23			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 813 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ADROEME C JACBSPM**

Mailing Address 1610 WINDSONG LANE

City	State	Zip Code
RICHMOND	TX	77406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

223.00

**Transaction ID : SA17A.123487**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

223.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN JACQUEMIN**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.123489**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL JACUZZI**

Mailing Address 1409 MARBLE CT

City	State	Zip Code
YUBA CITY	CA	95993

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CENTUY 21 SELECT REAL ESTATE, INC.

Occupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123491**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2973.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 814 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT JAEGER**

Mailing Address 3235 LA COSTA CIRCLE APT: 207

City	State	Zip Code
NAPLES	FL	34105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PELICAN BAY FOUNDATION

Occupation  
SERVER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

**Transaction ID : SA17A.123492**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT JAEGER**

Mailing Address 3235 LA COSTA CIRCLE APT: 207

City	State	Zip Code
NAPLES	FL	34105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PELICAN BAY FOUNDATION

Occupation  
SERVER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

**Transaction ID : SA17A.123493**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**W T JAGODINSKI**

Mailing Address 6415 THOMAS DR

1

City	State	Zip Code
PANAMA CITY B	FL	32408

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123495**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1125.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 815 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LOREN JAHN**

Mailing Address 13149 N COUNTRY CLUB CT

City	State	Zip Code
PALOS HEIGHTS	IL	60463

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123497**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AMY L JAMES**

Mailing Address 1063 CHERRY STREET

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123499**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ESWARD JAMES**

Mailing Address 70 GARDEN LN

City	State	Zip Code
NORTHFIELD	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE DEVELOPMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123503**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 816 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JERRELL D JAMES**

Mailing Address 7177 STATE ROUTE 1668

City	State	Zip Code
MARION	KY	42064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123505**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NAREN JAMES**

Mailing Address 115 VISTA CT

City	State	Zip Code
STANFORD	KY	40484

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STANFORD FAMILY MEDICINE

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123507**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS JAMES**

Mailing Address 1630 SEAWAY DRIVE, UNIT 106

City	State	Zip Code
FORT PIERCE	FL	34949

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123509**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 817 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AL JANISZEWSKI**

Mailing Address 1692 APACHE TRAIL

City	State	Zip Code
XENIA	OH	45385

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123511**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROD JANNEY**

Mailing Address 7611 DANNI MARIE CIR

City	State	Zip Code
CHEYENNE	WY	82009

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123513**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTIN JANNSEN**

Mailing Address N34W23895 GRACE AVE

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123515**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 818 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLE M JANSING**

Mailing Address 501 MEADOW STREET

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123517**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KRISTIN JANSSEN**

Mailing Address 3190 WALDWIC LANE

City	State	Zip Code
OSHKOSH	WI	54904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123519**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER N JANSSON**

Mailing Address 5200 WIND POINT DRIVE

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Jansson, Shupe & Munger

Occupation  
Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123521**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 819 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEROME JANZER**

Mailing Address **W307 N1677 SHADOWOOD POINT**

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REINHART BOERNER VAN DEUREN SC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123523**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABETH JARESKE**

Mailing Address **1237 N 131 ST**

City	State	Zip Code
OMAHA	NE	68154

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123525**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDA JARRETT**

Mailing Address **3 RIVERSIDE COURT**

City	State	Zip Code
PINEHURST	NC	28374

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123527**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 820 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERIC M JAVITS**

Mailing Address 150 BRADLEY PL  
4

City State Zip Code  
PALM BEACH FL 33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123529**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 04 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY JAY**

Mailing Address 50 FOX RUN LANE

City State Zip Code  
GREENWICH CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREAT POINT PARTNERS

Occupation  
VENTURE CAPITAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123531**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 21 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA E JELEN**

Mailing Address 1308 NORFIELD RD

City State Zip Code  
SUAMICO WI 54173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
WALL ARTIS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.123532**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 821 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA E JELEN**

Mailing Address 1308 NORFIELD RD

City	State	Zip Code
SUAMICO	WI	54173

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
WALL ARTIS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

**Transaction ID : SA17A.123533**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN R JELINEK**

Mailing Address 1339 BUNKER AVE.

City	State	Zip Code
FLOSSMOOR	IL	60422

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123535**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE JENKINS**

Mailing Address 901 WAKESTONE COURT

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MEDICAL MUTUAL

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123537**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 822 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN E JENKINS**

Mailing Address 1445 WHIPPLE AVE SW

City	State	Zip Code
CANTON	OH	44710

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
THE W.L. JENKINS CO INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123539**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES JENKS**

Mailing Address 800 DILIGENCE DR

City	State	Zip Code
NEWPORT NEWS	VA	23606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
OWNER

Occupation  
FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123541**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWIN JENNINGS**

Mailing Address PO BOX 55487

City	State	Zip Code
HOUSTON	TX	77255-5487

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123543**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 823 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**EDWIN JENNINGS**

Mailing Address **PO BOX 55487**

City State Zip Code  
**HOUSTON TX 77255-5487**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.123544**

Date of Receipt

**08 / 27 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VERN JENNINGS**

Mailing Address **30 VIA SIENA PL**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JENNINGS MANAGEMENT CONSULTING LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123546**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**VERN JENNINGS**

Mailing Address **30 VIA SIENA PL**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JENNINGS MANAGEMENT CONSULTING LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123547**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1100.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 824 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERIC JENSEN**

Mailing Address 2406 FOREST ST

City	State	Zip Code
CARROLL	IA	51401

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCFARLAND CLINIC

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123549**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GORDON JENSEN**

Mailing Address 566 DIPLOMAT COURT

City	State	Zip Code
MARCO ISLAND	FL	34145

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123551**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HOLLY JENSEN**

Mailing Address 659 FARWELL DRIVE

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128709**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 825 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAY JENSEN**

Mailing Address 659 FARWELL DRIVE

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CQC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123553**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAY JENSEN**

Mailing Address 659 FARWELL DRIVE

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CQC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128707**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER E JENSEN**

Mailing Address W5202 LARSON ROAD

City	State	Zip Code
RIO	WI	53960

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WISCONSIN AVIATION

Occupation  
PILOT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.123555**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

240.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5640.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 826 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**W. C JERNIGAN**

Mailing Address **5 TURNBERRY PLACE**

City

**SHOAL CREEK**

State

**AL**

Zip Code

**35242**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123557**

Date of Receipt

**08**

**17**

**2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS JESINSKI**

Mailing Address **7039 165TH ST. NO.**

City

**HUGO**

State

**MN**

Zip Code

**55038**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**AKAL SECURITY INC**

Occupation

**FED. COURT SECURITY OFFICER**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123558**

Date of Receipt

**09**

**10**

**2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CYNTHIA JETZER**

Mailing Address **18814 TWIN BAY LANE**

City

**KIEL**

State

**WI**

Zip Code

**53042**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**LDS ACQUISITION CORP**

Occupation

**COO**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123560**

Date of Receipt

**06**

**25**

**2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 827 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TONY JEWELL**

Mailing Address **22 SOUTH BUFFALO**

City	State	Zip Code
VENTNOR	NJ	08406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BOARDWALK PUBLIC RELATIONS**

Occupation  
**PUBLIC RELATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123562**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES JOHANNIS**

Mailing Address **1101 IROQUOIS AVE**  
**2**

City	State	Zip Code
NAPERVILLE	IL	60563

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123564**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JASON JOHNS**

Mailing Address **4666 RUTLAND DUNN TOWNLINE RD**

City	State	Zip Code
OREGON	WI	53575

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WISCONSIN LEGISLATIVE STRATEGIES, INC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123566**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 828 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANNE JOHNSON**

Mailing Address 6559 S NORTHSORE DR

City	State	Zip Code
KNOXVILLE	TN	37919

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DEAN-SMITH INC.

Occupation  
REAL ESTATE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123568**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARTHUR J JOHNSON**

Mailing Address 505 E 14TH STREET

City	State	Zip Code
STERLING	IL	61081

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123570**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ARTHUR J JOHNSON**

Mailing Address 505 E 14TH STREET

City	State	Zip Code
STERLING	IL	61081

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123571**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 829 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BILL JOHNSON**

Mailing Address 16703 W 4TH STREET

City	State	Zip Code
HAYWARD	WI	54843

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123573**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BILL JOHNSON**

Mailing Address 16703 W 4TH STREET

City	State	Zip Code
HAYWARD	WI	54843

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128747**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRYAN JOHNSON**

Mailing Address 3137 DEVONSHIRE WAY

City	State	Zip Code
GERMANTOWN	TN	38139

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123575**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 830 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES JOHNSON**

Mailing Address 3395 S JONES BOULEVARD

City	State	Zip Code
LAS VEGAS	NV	89146

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123577**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRIS JOHNSON**

Mailing Address 750 COUNTY ROAD D

City	State	Zip Code
WILLOWS	CA	95988

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123579**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID JOHNSON**

Mailing Address 8322 CORPORATE DRIVE

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123581**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 831 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERIC JOHNSON**

Mailing Address 837 S PARK TRAIL DRIVE

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123583**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ERIC B JOHNSON**

Mailing Address 806 HONEY RIDGE ROAD

City	State	Zip Code
GUYTON	GA	31312

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123585**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERIC JOHNSON**

Mailing Address 837 S PARK TRAIL DRIVE

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

830.00

**Transaction ID : SA17A.123586**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

330.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1330.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 832 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EVELYN JOHNSON**

Mailing Address **3134 TALBOT TRAIL**

City	State	Zip Code
ROCKFORD	IL	61114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123588**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GWEN A JOHNSON**

Mailing Address **N170W20239 HUNTERS R**

City	State	Zip Code
JACKSON	WI	53037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AURORA HEALTHCARE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1200.00**

**Transaction ID : SA17A.123590**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

**1200.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GWEN A JOHNSON**

Mailing Address **N170W20239 HUNTERS R**

City	State	Zip Code
JACKSON	WI	53037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AURORA HEALTHCARE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1450.00**

**Transaction ID : SA17A.123591**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK JOHNSON**

Mailing Address 1305 NEW MEXICO ST.

City	State	Zip Code
BOULDER CITY	NV	89005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STANLEY CONSULTANTS**

Occupation  
**INSPECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123592**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOANNE JOHNSON**

Mailing Address 70 ROBLEY ROAD

City	State	Zip Code
SALINAS	CA	93908

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123594**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN JOHNSON**

Mailing Address E4988 TIMBERLINE RD

City	State	Zip Code
SPRING GREEN	WI	53588

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123596**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1300.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 834 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOYCE A. JOHNSON**

Mailing Address 1176 ORLO DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123598**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIETTE JOHNSON**

Mailing Address 8322 CORPORATE DRIVE

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EW Johnson Inc

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123600**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KINNEY JOHNSON**

Mailing Address 1610 LITTLE RAVEN ST

City	State	Zip Code
DENVER	CO	80202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SEQUEL VENTURE PARTNERS

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123602**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 835 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LYMAN JOHNSON**

Mailing Address **695 STILL HOUSE DRIVE**

City <b>LEXINGTON</b>	State <b>VA</b>	Zip Code <b>24450</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WASHINGTON AND LEE UNIVERSITY**

Occupation  
**LAW PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123604**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK JOHNSON**

Mailing Address **230 WEST COLEMAN STREET**

City <b>RICE LAKE</b>	State <b>WI</b>	Zip Code <b>54868</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123606**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD JOHNSON**

Mailing Address **63 COTTONWOOD LANE**

City <b>BRIARCLIFF MANOR</b>	State <b>NY</b>	Zip Code <b>10510</b>
---------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123608**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD JOHNSON**

Mailing Address 3900 PLYMOUHT BOULEVARD

City	State	Zip Code
PLYMOUTH	MN	55446

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123610**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT JOHNSON**

Mailing Address 11443 N SHORECLIFF LANE

City	State	Zip Code
THIENSVILLE	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
JOHNSON LEVEL

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123611**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT G. JOHNSON**

Mailing Address 500 RUE CHATEAUGUAY

City	State	Zip Code
OCEAN SPRINGS	MS	39564-3025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SURGEON

Occupation  
SRHS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123613**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT G. JOHNSON**

Mailing Address 500 RUE CHATEAUGUAY

City	State	Zip Code
OCEAN SPRINGS	MS	39564-3025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SURGEON

Occupation  
SRHS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123614**

Date of Receipt

**08 / 09 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT M. JOHNSON**

Mailing Address 1176 ORLO DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123616**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STANLEY JOHNSON**

Mailing Address 1261 WALNUT DR

City	State	Zip Code
LAKE CHARLES	LA	70611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
W&R FOOD SERVICES, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123618**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 838 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TALI JOHNSON**

Mailing Address **16703 W 4TH STREET**

City State Zip Code  
**HAYWARD WI 54843**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128749**

Date of Receipt

**06 / 18 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS JOHNSON**

Mailing Address **7520 TAYLOR DR**

City State Zip Code  
**SAVAGE MN 55378**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE WARREN E. JOHNSON COMPANY**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123620**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER JOHNSON**

Mailing Address **1000 UPTOWN PARK BLV #81**

City State Zip Code  
**HOUSTON TX 77056**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AMEGY BANK**

Occupation  
**BANKING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123622**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 839 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM R JOHNSON**

Mailing Address 948 DUCHESS DR

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123623**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HELEN JOHNSON-LEIPOLD**

Mailing Address 555 MAIN STREET, STE 500

City	State	Zip Code
RACINE	WI	53403

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128739**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE L JOHNSTON**

Mailing Address 2522 CROFTON CT

City	State	Zip Code
BLOOMFIELD HI	MI	48304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123625**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 840 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**R WILLIAM JOHNSTON**

Mailing Address 7276 SOUTH NEWPORT WAY

City	State	Zip Code
CENTENNIAL	CO	80112

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123627**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL JOHNSTON JR**

Mailing Address 1940 NW MILLER RD APT. B307

City	State	Zip Code
PORTLAND	OR	97229

FEC ID number of contributing federal political committee.

C

Name of Employer  
SKANSKA

Occupation  
ENVIRONMENTAL SAFETY & HEALTH  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123628**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY JOINER**

Mailing Address 2507 RUSSELL PARKWAY

City	State	Zip Code
GREAT BEND	KS	67530

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123630**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 841 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GLENN JONAS**

Mailing Address 1903 GRANVILLE RD

City	State	Zip Code
CEDARBURG	WI	53012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RF TECHNOLOGIES, INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123632**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLENN JONAS**

Mailing Address 1903 GRANVILLE RD

City	State	Zip Code
CEDARBURG	WI	53012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RF TECHNOLOGIES, INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.123633**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GLENN JONAS**

Mailing Address 1903 GRANVILLE RD

City	State	Zip Code
CEDARBURG	WI	53012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RF TECHNOLOGIES, INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128833**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-1000.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 842 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY JONAS**

Mailing Address 1903 GRANVILLE RD

City	State	Zip Code
CEDARBURG	WI	53012

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RF TECHNOLOGIES, INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128835**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALYCE M JONES**

Mailing Address 3421 N POWERLINE RD

City	State	Zip Code
POMPANO BEACH	FL	33069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
A.M. JONES, CPA, PA

Occupation  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123635**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREW R JONES**

Mailing Address 4 COMPO PKWY

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NORTH STAR PARTNERS

Occupation  
CFA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123637**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 843 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRYAN JONES**

Mailing Address 19175 INDUSTRIAL BLVD.

City	State	Zip Code
ELK RIVER	MN	55330

FEC ID number of contributing federal political committee.

C

Name of Employer  
SMI

Occupation  
BUSINESS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123639**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CINDY JONES**

Mailing Address 103 NORTHWIND

City	State	Zip Code
BOERNE	TX	78006

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123641**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID JONES**

Mailing Address 1365 RED BRICK LANE

City	State	Zip Code
SUN PRAIRIE	WI	53590

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123643**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 844 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRANCIS JONES**

Mailing Address 1616 WALLOOMSAC ROAD

City	State	Zip Code
BENNINGTON	VT	05201

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123645**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALDIN L JONES**

Mailing Address 22139 SOUTHEAST 40TH LA

City	State	Zip Code
ISSAQUAH	WA	98029

FEC ID number of contributing federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123647**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LISA JONES**

Mailing Address 1882 WESTVIEW RD.

City	State	Zip Code
CHARLOTTESVILLE	VA	22903

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123649**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1300.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 845 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY JONES**

Mailing Address 10607 N. HIDDEN CREEK CT

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123651**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL JONES**

Mailing Address 6920 N BARNETT LANE

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Harley-Davidson inc

Occupation  
Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123653**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN JONES**

Mailing Address 2961 COUNTY ROAD 529

City	State	Zip Code
ALVIN	TX	77511

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
OIL FIELD CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123655**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 846 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WAYNE JONES**

Mailing Address PO BOX 25

City

BINGHAMTON

State

NY

Zip Code

13903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BINGHAM UNIVERSITY

Occupation

PROFESSOR

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.123657**

Date of Receipt

MM / DD / YYYY  
08 / 04 / 2015

04

2015

Amount of Each Receipt this Period

375.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM JONES**

Mailing Address 4180 N PORT WASHINGTON ROAD

City

GLENDALE

State

WI

Zip Code

53212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WCJ PILGRIM WIRE LLC

Occupation

EXECUTIVE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123659**

Date of Receipt

MM / DD / YYYY  
07 / 24 / 2015

24

2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM JONES**

Mailing Address 1734 STONE HOLLOW CT

City

BOUNTIFUL

State

UT

Zip Code

84010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123661**

Date of Receipt

MM / DD / YYYY  
07 / 27 / 2015

27

2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1275.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 847 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM B JONES**

Mailing Address PO BOX 933

City	State	Zip Code
JACKSON	GA	30233

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.123663**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM B JONES**

Mailing Address PO BOX 933

City	State	Zip Code
JACKSON	GA	30233

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123663.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM B JONES**

Mailing Address PO BOX 933

City	State	Zip Code
JACKSON	GA	30233

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.123663.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNED ON  
12/10/2015

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 848 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM JONES MD**

Mailing Address 1554 RIVER PINES DR

City	State	Zip Code
GREEN BAY	WI	54311

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123665**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD JONSON**

Mailing Address 16 HAWKVIEW RD

City	State	Zip Code
HUDSON	NH	03051

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.123666**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GRANT JONSSON**

Mailing Address 327 LINDSAY RD

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMERICAN CHRISTIAN TOURS INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123668**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 849 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS J JORDAN**

Mailing Address **1474 ALEXANDER VALLE**

City	State	Zip Code
HEALDSBURG	CA	95448

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JORDAN WINERY**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123670**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TYLER JORDAN**

Mailing Address **12849 MILL HOUSE CT**

City	State	Zip Code
WOODBIDGE	VA	22192

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JUNIPER NETWORKS INC**

Occupation  
**NETWORK ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123672**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL JOSEPH**

Mailing Address **15303 CORSINI LANE**

City	State	Zip Code
NAPLES	FL	34110

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123674**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 850 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE JOSEPH**

Mailing Address 365 S HUDSON AVE

City

LOS ANGELES

State

CA

Zip Code

90020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

MERCURY INSURANCE

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.123676**

Date of Receipt

**08 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

3000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE JOSEPH**

Mailing Address 365 S HUDSON AVE

City

LOS ANGELES

State

CA

Zip Code

90020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

MERCURY INSURANCE

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123677**

Date of Receipt

**08 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE JOSEPH**

Mailing Address 365 S HUDSON AVE

City

LOS ANGELES

State

CA

Zip Code

90020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

MERCURY INSURANCE

Occupation

OWNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.123678**

Date of Receipt

**08 / 03 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 851 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROGER A JOSEPH**

Mailing Address **7855 FAY AVE**

City

**LA JOLLA**

State

**CA**

Zip Code

**92037**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**FRANKLIN CROFT INC**

Occupation

**CEO**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123680**

Date of Receipt

**07**

**27**

**2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID JOYCE**

Mailing Address **6902 SWEETBRIAR**

City

**DARIEN**

State

**IL**

Zip Code

**60561**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123682**

Date of Receipt

**07**

**17**

**2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT JUDSON**

Mailing Address **3 TURTLE GROVE LANE**

City

**VILLAGE OF GOLF**

State

**FL**

Zip Code

**33436**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**KC FUNDING, LLC**

Occupation

**SCHOOL OWNER**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123684**

Date of Receipt

**07**

**14**

**2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 852 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN P JUNGE**

Mailing Address 12250 EL CAMINO REAL

City	State	Zip Code
SAN DIEGO	CA	92130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123686**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LOLITA M KACHEL**

Mailing Address 513 W CENTER ST

City	State	Zip Code
WHITEWATER	WI	53190

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WISCONSIN DAIRY SUPPLY

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123688**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FERENC KACSINTA**

Mailing Address 7323 CARTWRIGHT AVE

City	State	Zip Code
SUN VALLEY	CA	91352

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BUILDING CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123690**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 853 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NEIL KADISHA**

Mailing Address 9420 WILSHIRE BLVD

City	State	Zip Code
BEVERLY HILLS	CA	90212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**OMNINET INVESTMENTS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123692**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NEIL KADISHA**

Mailing Address 9420 WILSHIRE BLVD

City	State	Zip Code
BEVERLY HILLS	CA	90212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**OMNINET INVESTMENTS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.123693**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NEIL KADISHA**

Mailing Address 9420 WILSHIRE BLVD

City	State	Zip Code
BEVERLY HILLS	CA	90212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**OMNINET INVESTMENTS**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123694**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 854 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MELVIN KAFTAN**

Mailing Address 29100 NORTHWESTERN HWY

City	State	Zip Code
SOUTHFIELD	MI	48034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KAFTAN ENTERPRISES

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123695**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANN MARI KAMINSKI**

Mailing Address 995 S GROUSE LANE

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CHULA VISTA RESORT

Occupation  
HUMAN RESOURCES EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123697**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFFERY M KAMINSKI**

Mailing Address 1003 HILLSIDE COURT

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123699**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 855 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN KANE**

Mailing Address 206 DRUMMOND DR

City  
RALEIGH

State Zip Code  
NC 27609-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KANE REALTY CORPORATION

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123701**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDITH KANE**

Mailing Address 14 PINEHURST LANE

City  
FALMOUTH

State Zip Code  
ME 04105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123703**

Date of Receipt

M M / D D / Y Y Y Y  
08 07 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAN KAPANKE**

Mailing Address 1610 LAKESHORE DR

City  
LA CROSSE

State Zip Code  
WI 54603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.123705**

Date of Receipt

M M / D D / Y Y Y Y  
07 29 2015

Amount of Each Receipt this Period

253.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1753.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 856 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALAN KAPLAN**

Mailing Address 1540 HAZEL AVENUE

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REPAK REAL ESTATE DEVELOPMENT**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123707**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN KAPLAN**

Mailing Address 1540 HAZEL AVENUE

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REPAK REAL ESTATE DEVELOPMENT**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128734**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHELLE KAPLAN**

Mailing Address 1540 HAZEL AVENUE

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 857 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER KAPSALIS**

Mailing Address 41 TROSSACH ROAD

City	State	Zip Code
STATEN ISLAND	NY	10304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CINE MAGIC EAST RIVER STUDIOS

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123709**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J. DAVID KARAM**

Mailing Address 2380 ONANDAGA DR

City	State	Zip Code
COLUMBUS	OH	43221

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SBARRO

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123711**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOP D KARLS**

Mailing Address 2444 SUMMIT RIDGE TRAIL

City	State	Zip Code
CHARLOTTESVIL	VA	22911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123713**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 858 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. KARLS**

Mailing Address **W6117 WILD CHERRY CT**

City <b>MENASHA</b>	State <b>WI</b>	Zip Code <b>54952</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123715**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KERRY KARLSON**

Mailing Address **28409 COUNTRY MEADOWS LN**

City <b>KENNEWICK</b>	State <b>WA</b>	Zip Code <b>99338</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**K&V ENTERPRISES LLC**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.123716**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER KAROPCZYK**

Mailing Address **2 PERRY LN**

City <b>NYACK</b>	State <b>NY</b>	Zip Code <b>10960</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BRISTOL CAPITAL, INC.**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123717**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 859 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE KARPUS**

Mailing Address 183 SULLYS TRAIL

City	State	Zip Code
PITTSFORD	NY	14534

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KARPUS INN MGMT

Occupation  
INVEST. AD

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123719**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS KARRAS**

Mailing Address 231 WOODDED WAY

City	State	Zip Code
BERWYN	PA	19312

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123721**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**G. FREDE KASTEN**

Mailing Address 160 LOGGERHEAD PT

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123723**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 860 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**G. FREDE KASTEN**

Mailing Address 160 LOGGERHEAD PT

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123724**

Date of Receipt

**07 / 02 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUSAN W KASTEN**

Mailing Address 160 LOGGERHEAD PT

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123726**

Date of Receipt

**07 / 02 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**L.M. KAUFFMANN**

Mailing Address 1565 BAY POINT DR

City	State	Zip Code
SARASOTA	FL	34236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123728**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 861 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NEAL KAUFMAN**

Mailing Address **216 BLOOMFIELD ROAD**

City	State	Zip Code
<b>BURLINGAME</b>	<b>CA</b>	<b>94010</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HILLAIR CAPITAL**

Occupation  
**FINANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123730**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES KAY**

Mailing Address **12105 TERRAZA CIRCLE**

City	State	Zip Code
<b>AUSTIN</b>	<b>TX</b>	<b>78726</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123732**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT KAY**

Mailing Address **1608 GASTON AVE**

City	State	Zip Code
<b>AUSTIN</b>	<b>TX</b>	<b>78703</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DRILLING INFO, INC**

Occupation  
**BUS EXEC**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123734**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 862 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT KAY**

Mailing Address 1608 GASTON AVE

City	State	Zip Code
AUSTIN	TX	78703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DRILLING INFO, INC

Occupation  
BUS EXEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123735**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT KAY**

Mailing Address 1608 GASTON AVE

City	State	Zip Code
AUSTIN	TX	78703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DRILLING INFO, INC

Occupation  
BUS EXEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123735.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT KAY**

Mailing Address 1608 GASTON AVE

City	State	Zip Code
AUSTIN	TX	78703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DRILLING INFO, INC

Occupation  
BUS EXEC

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123735.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 863 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN KAY**

Mailing Address 1608 GASTON AVE

City	State	Zip Code
AUSTIN	TX	78703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123737**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KRAIG KAYSER**

Mailing Address 122 TERRACE DRIVE

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SENECA FOODS CORPORATION

Occupation  
PRESIDENT AND CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123739**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**C V KAZMIEROWI**

Mailing Address 17094 OBSIDIAN DR

City	State	Zip Code
RAMONA	CA	92065

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123741**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 864 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEVIN W KEANE**

Mailing Address 6609 BESTWICKE RD

City	State	Zip Code
BURKE	VA	22015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AMERICAN BEVERAGE ASSOCIATION

Occupation  
SENIOR VICE PRES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123743**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALFRED S KEATON**

Mailing Address 5296 SCOFIELD TRAIL

City	State	Zip Code
WILLIAMSBURG	MI	49690

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123745**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KATHY KEATON**

Mailing Address P.O. BOX 246

City	State	Zip Code
WILLIAMSBURG	MI	49690

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123747**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3425.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 865 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK KEATON**

Mailing Address 7641 SW 119TH ST

City	State	Zip Code
DENTON	NE	68339

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
QE SYSTEMS, INC.

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123749**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT A KEEDY**

Mailing Address 1100 ASCOTT VALLEY DR

City	State	Zip Code
DULUTH	GA	30097

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123751**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHARON KEELER**

Mailing Address 1483 CR 6300

City	State	Zip Code
FAIRFAX	OK	74637

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123753**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 866 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLAY KEEN**

Mailing Address **PO BOX 573**

City <b>TYRONE</b>	State <b>NM</b>	Zip Code <b>88065</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123755**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS L KEENAN**

Mailing Address **70 CRANE ST**

City <b>NEW ORLEANS</b>	State <b>LA</b>	Zip Code <b>70124</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KEENAN STAFFING INC.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.123757**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

**400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK KEENEY**

Mailing Address **4784 S UPHAM CT**

City <b>LITTLETON</b>	State <b>CO</b>	Zip Code <b>80123</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123759**

Date of Receipt

**06 / 25 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 867 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANICE R KEHLE**

Mailing Address 1000 JULIANO COURT

City	State	Zip Code
BARRINGTON HI	IL	60010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123761**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRUCE KEHR MD**

Mailing Address 9429 HOLBROOK LANE

City	State	Zip Code
POTOMAC	MD	20854

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
POTOMAC PSYCHIATRY

Occupation  
PSYCHIATRIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123763**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RALPH KEITH**

Mailing Address 10 CARRIAGE LANE

City	State	Zip Code
YARMOUTH	ME	04096

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123765**

Date of Receipt

**07 / 19 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 868 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RANDY KEITH**

Mailing Address 2095 VISTA MAR DR

City	State	Zip Code
EL DORADO HIL	CA	95762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SIEMENS**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123766**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RANDY KEITH**

Mailing Address 2095 VISTA MAR DR

City	State	Zip Code
EL DORADO HIL	CA	95762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SIEMENS**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.123767**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALEX KELLER**

Mailing Address 535 ROLLINGBROOK LN

City	State	Zip Code
CINCINNATI	OH	45255

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123769**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 869 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS KELLER**

Mailing Address 1155 35TH STREET

City	State	Zip Code
OAK BROOK	IL	60523

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123771**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY KELLER**

Mailing Address W775 SPRING PRAIRIE ROA

City	State	Zip Code
BURLINGTON	WI	53105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128865**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUSTIN M KELLER**

Mailing Address P.O. BOX 62197

City	State	Zip Code
SUNNYVALE	CA	94088

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123773**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET F KELLER**

Mailing Address **W775 SPRING PRAIRIE ROA**

City	State	Zip Code
<b>BURLINGTON</b>	<b>WI</b>	<b>53105</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.123775**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET F KELLER**

Mailing Address **W775 SPRING PRAIRIE ROA**

City	State	Zip Code
<b>BURLINGTON</b>	<b>WI</b>	<b>53105</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128863**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT S KELLER**

Mailing Address **6898 BELL CT**

City	State	Zip Code
<b>REX</b>	<b>GA</b>	<b>30273</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123777**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 871 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM KELLER**

Mailing Address 25088 N PEARL RD

City	State	Zip Code
ACAMPO	CA	95220

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123779**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL KELLETT**

Mailing Address 3651 TUXEDO RD NW

City	State	Zip Code
ATLANTA	GA	30305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123781**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SAMUEL KELLETT**

Mailing Address 12166 N STATE ROAD 5

City	State	Zip Code
MADISON	FL	32340

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SBK CAPITAL LLC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123783**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SAMUEL KELLETT**

Mailing Address 12166 N STATE ROAD 5

City	State	Zip Code
MADISON	FL	32340

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SBK CAPITAL LLC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123784**

Date of Receipt

**07** / **13** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SAMUEL KELLETT**

Mailing Address 12166 N STATE ROAD 5

City	State	Zip Code
MADISON	FL	32340

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SBK CAPITAL LLC

Occupation  
OWNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123785**

Date of Receipt

**07** / **13** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STILES A KELLETT**

Mailing Address 3651 TUXEDO RD NW

City	State	Zip Code
ATLANTA	GA	30305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KELLETT INVESTMET CORPORATION

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123787**

Date of Receipt

**07** / **13** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STILES A KELLETT**

Mailing Address 3651 TUXEDO RD NW

City	State	Zip Code
ATLANTA	GA	30305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KELLETT INVESTMET CORPORATION**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123788**

Date of Receipt

**07 / 13 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK W KELLNER**

Mailing Address 10271 ANN MARIE DR

City	State	Zip Code
CEDARBURG	WI	53012

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MCP CO INC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123790**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MRS. DONNA KELLOGG**

Mailing Address 11991 36TH STREET NW

City	State	Zip Code
WATFORD CITY	ND	58854

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123792**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 874 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEVIN J KELLY**

Mailing Address 253 SAGAMORE RD

City	State	Zip Code
HAVERTOWN	PA	19083

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PLANET FITNESS**

Occupation  
**FRANCHISE CO-OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123794**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEON KELLY**

Mailing Address P.O. BOX 921

City	State	Zip Code
FOLSOM	CA	95763

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PLUMBING ENTERPRISES**

Occupation  
**CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123796**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDSAY KELLY**

Mailing Address 33 KALORAMA CIRCLE NW

City	State	Zip Code
WASHINGTON	DC	20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**IRELL & MANELLA LLP**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123798**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 875 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**LOIS KELLY**

Mailing Address **28231 PARKHILL STREET**

City <b>FARMINGTON HILLS</b>	State <b>MI</b>	Zip Code <b>48334</b>
---------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123799**

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT J KELLY**

Mailing Address **5901 COVINGTON CT**

City <b>MINNETONKA</b>	State <b>MN</b>	Zip Code <b>55345</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123801**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EUGENE KELTON**

Mailing Address **2312 AMHERST ST**

City <b>FORT COLLINS</b>	State <b>CO</b>	Zip Code <b>80525</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123803**

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1200.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 876 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN KEMMERER**

Mailing Address P.O. BOX 6848

City	State	Zip Code
JACKSON	WY	83002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
JACKSON HOLE MOUNTAIN RESORT

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123805**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT L KEMP**

Mailing Address 1330 MONUMENT ST

City	State	Zip Code
CONCORD	MA	01742

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123807**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEAN KENNEDY**

Mailing Address 1004 S SIERRA VISTA AVE

City	State	Zip Code
ALHAMBRA	CA	91801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 877 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEAN KENNEDY**

Mailing Address 1004 S SIERRA VISTA AVE

City	State	Zip Code
ALHAMBRA	CA	91801

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.123810**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEAN KENNEDY**

Mailing Address 1004 S SIERRA VISTA AVE

City	State	Zip Code
ALHAMBRA	CA	91801

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.123811**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEAN KENNEDY**

Mailing Address 1004 S SIERRA VISTA AVE

City	State	Zip Code
ALHAMBRA	CA	91801

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

**Transaction ID : SA17A.123812**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 878 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEAN KENNEDY**

Mailing Address 1004 S SIERRA VISTA AVE

City	State	Zip Code
ALHAMBRA	CA	91801

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123813**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 18 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEAN KENNEDY**

Mailing Address 1004 S SIERRA VISTA AVE

City	State	Zip Code
ALHAMBRA	CA	91801

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.123814**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEROME W KENNEY**

Mailing Address 720 9TH AVE N

City	State	Zip Code
SEATTLE	WA	98109

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123816**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 879 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL KENNEY**

Mailing Address **241 SHELLS CHURCH ROAD**

City	State	Zip Code
GRANTVILLE	PA	17028

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123818**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM C KENNEY**

Mailing Address **120 N EL CAMINO REAL**

City	State	Zip Code
SAN MATEO	CA	94401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123820**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNIS KENNY**

Mailing Address **1435 FRANKLIN**

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KENNY & KENNY, P.C.**

Occupation  
**CERTIFIED PUBLIC ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123822**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 880 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS KENNY**

Mailing Address 1435 FRANKLIN

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing federal political committee.

C

Name of Employer  
KENNY & KENNY, P.C.

Occupation  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123823**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MONICA KEPES**

Mailing Address 400 W DICKENS AVE

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123825**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE KEPLINGER**

Mailing Address 3005 PRINCETON AVE

City	State	Zip Code
MIDDLETOWN	OH	45042

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123827**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 881 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN JAY KERCHLICH**

Mailing Address 15509 ORION ST

City	State	Zip Code
LAKE ELSINORE	CA	92530

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123829**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARY J KERGER**

Mailing Address 1 S 770 COUNTRY CLUB LA

City	State	Zip Code
WHEATON	IL	60189

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ABBEY PROVIDENT VENTURE LLC

Occupation  
MANAGING MEMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123831**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALBERT KERNS**

Mailing Address 3411 ARLETTE DR

City	State	Zip Code
NAPLES	FL	34109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123833**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1750.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 882 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES R KERSTEN**

Mailing Address 2506 SKYLINE DR

City	State	Zip Code
JANESVILLE	WI	53548

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123835**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE KERWIN**

Mailing Address 930 HICKORD AVE

City	State	Zip Code
DEPERE	WI	54115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BELLIN HEALTH**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123837**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

**EARMARKED THROUGH REALTORS DIRECT GIVER  
PROGRAM**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT E KETTLER**

Mailing Address 2570 N 85TH ST

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WISCONSIN PHYSICIANS SERVICE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123839**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 883 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALBERT KEY**

Mailing Address PO BOX 768

City

POINT CLEAR

State

AL

Zip Code

36564

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123840**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT KEY**

Mailing Address 111 SCOTT HILL RD TH #3

City

BEAVER CREEK

State

CO

Zip Code

81620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCOTT ARMATURE

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123842**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ABE KHALIL**

Mailing Address 9 SCOTT CT

City

DAYTON

State

NJ

Zip Code

08810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.123844**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 20 / 2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

825.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 884 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA KIELMEYER**

Mailing Address 1414 119TH ST NW

City	State	Zip Code
MONTICELLO	MN	55362

FEC ID number of contributing federal political committee.

C

Name of Employer  
MORTGAGE REFERENCES INC

Occupation  
PUBLISHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123846**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RANDALL KIESER**

Mailing Address 3231 ALTA VISTA ROAD

City	State	Zip Code
TORRINGTON	WY	82240

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123847**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BASSETT KILGORE**

Mailing Address 2721 ROSEDALE AVENUE

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.123849**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

803.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 885 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEN KILGORE**

Mailing Address 1011 GRANDVIEW LN

City	State	Zip Code
VAN BUREN	AR	72956

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123851**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MANLEY KILGORE**

Mailing Address 12904 BAY PLANTATION

City	State	Zip Code
JACKSONVILLE	FL	32223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123853**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MANLEY KILGORE**

Mailing Address 12904 BAY PLANTATION

City	State	Zip Code
JACKSONVILLE	FL	32223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123854**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 886 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN KILLGORE**

Mailing Address 1023 WYNNWOOD LN.

City	State	Zip Code
HOUSTON	TX	77008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123856**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN KILROY SR**

Mailing Address 13600 MARINA POINT DRIVE  
UNIT 1215

City	State	Zip Code
MARINA DEL RAY	CA	90292

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123858**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN KILROY JR.**

Mailing Address 12200 W. OLYMPIC BLVD.  
STE. 200

City	State	Zip Code
LOS ANGELES	CA	90064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KILROY REALTY CORPORATION

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123860**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 887 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES KIM**

Mailing Address **4880 COMMONWEALTH AVE**

City <b>LA CANADA</b>	State <b>CA</b>	Zip Code <b>91011</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123862**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES KIM**

Mailing Address **4880 COMMONWEALTH AVE**

City <b>LA CANADA</b>	State <b>CA</b>	Zip Code <b>91011</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.123863**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES KIM**

Mailing Address **4880 COMMONWEALTH AVE**

City <b>LA CANADA</b>	State <b>CA</b>	Zip Code <b>91011</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123863.0**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 888 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HYUNJU KIM**

Mailing Address **4880 COMMONWEALTH AVE**

City <b>LA CANADA</b>	State <b>CA</b>	Zip Code <b>91011</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRANS PAC INC.**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123863.1**

Date of Receipt

**07 / 31 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONG KOO KIM**

Mailing Address **1332 PASEO DEL MAR**

City <b>PALOS VERDES ESTS.</b>	State <b>CA</b>	Zip Code <b>90274</b>
-----------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BP INDUSTRIES. INC**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123865**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN KIMPEL**

Mailing Address **1336 WATERS EDGE DRIVE**

City <b>OCONOMOWOC</b>	State <b>WI</b>	Zip Code <b>53066</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.123866**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**550.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 889 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABET S KINCAID**

Mailing Address **245 CAMERON RIDGE DR**

City	State	Zip Code
ATLANTA	GA	30328

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**DENTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123868**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUSAN L KINER**

Mailing Address **448 E NORTH WATER ST**

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WGCI RADIO**

Occupation  
**COMMUNICATIONS CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123870**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RONALD KING**

Mailing Address **85 SARVIS RIDGE ROAD**

City	State	Zip Code
NORMANDY	TN	37360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PILOT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123872**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 890 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD KING**

Mailing Address 85 SARVIS RIDGE ROAD

City	State	Zip Code
NORMANDY	TN	37360

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PILOT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123873**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDY KING**

Mailing Address 3349 2ND DRIVE

City	State	Zip Code
OXFORD	WI	53952

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REAL ESTATE**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123875**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SANDY KING**

Mailing Address 3349 2ND DRIVE

City	State	Zip Code
OXFORD	WI	53952

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REAL ESTATE**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128889**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 891 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SANDY KING**

Mailing Address 3349 2ND DRIVE

City  
OXFORD

State Zip Code  
WI 53952

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REAL ESTATE

Occupation  
SELF EMPLOYED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128890**

Date of Receipt

M M / D D / Y Y Y Y  
07 24 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RODNEY J KINNARD**

Mailing Address N7990 OAK RD

City  
CASCO

State Zip Code  
WI 54205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123877**

Date of Receipt

M M / D D / Y Y Y Y  
07 22 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY KINNINGER**

Mailing Address 2108 CATON WAY SW

City  
OLYMPIA

State Zip Code  
WA 98502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123879**

Date of Receipt

M M / D D / Y Y Y Y  
06 19 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 892 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DENNIS KINSEY**

Mailing Address P.O. BOX 473

City	State	Zip Code
ARTESIA	NM	88211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
YATES PETROLEUM CORPORATION

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123881**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES KINTNER**

Mailing Address 23161 LAKE CENTER DR

City	State	Zip Code
LAKE FOREST	CA	92630

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123883**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**F. L KIRBY**

Mailing Address 1800 NORTH POND LANE

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123885**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

750.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 893 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUDITH M KIRBY**

Mailing Address 1800 W NORTH POND LN

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123887**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**I. RAYMO KIRK**

Mailing Address 3756 WESTERMAN ST

City	State	Zip Code
HOUSTON	TX	77005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123889**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LORENE KIRKPATRIC**

Mailing Address 1054 N VON MINDEN STREE

City	State	Zip Code
LA GRANGE	TX	78945

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123891**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 894 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TED KIRKPATRICK**

Mailing Address 11434 HUNTSMAN DRIVE

City	State	Zip Code
MANASSAS	VA	20112

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BATTLEFIELD WEALTH PLANNING**

Occupation  
**FINANCIAL ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.123892**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARION KIRWIN**

Mailing Address 19 PARK AVENUE

City	State	Zip Code
EAST FALLOWFIELD	PA	19320

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123894**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE KISKUNAS**

Mailing Address 1516 SHERMAN AVE

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BAKER TILLY VIRCHOW KRAUSE LLP**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123896**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 895 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JIM KISSLER**

Mailing Address 1591 E SENDERO LN

City	State	Zip Code
BOISE	ID	83712

FEC ID number of contributing federal political committee.

C

Name of Employer  
NORCO, INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123898**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN KJELGAARD**

Mailing Address 620 CHERRY DR

City	State	Zip Code
BRIGHAM CITY	UT	84302

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123899**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT KLEIDERLEI**

Mailing Address 5600 MCALPINE FARM ROAD

City	State	Zip Code
CHARLOTTE	NC	28226

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123901**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 896 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES N KLEIN**

Mailing Address **183 BIRCHTREE CT**

City <b>CLINTONVILLE</b>	State <b>WI</b>	Zip Code <b>54929</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.123903**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICK KLEIN**

Mailing Address **3635 CHESTERWOOD COURT**

City <b>BROOKFIELD</b>	State <b>WI</b>	Zip Code <b>53005</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AURORA HEALTHCARE**

Occupation  
**VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123905**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TRACEY KLEIN**

Mailing Address **3635 CHESTERWOOD COURT**

City <b>BROOKFIELD</b>	State <b>WI</b>	Zip Code <b>53005</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REINHART**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.123907**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 897 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KRISTIN KLEY**

Mailing Address 4879 PRESTWICK SOUTH CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123909**

Date of Receipt

**08 / 31 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KRISTIN KLEY**

Mailing Address 4879 PRESTWICK SOUTH CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128848**

Date of Receipt

**08 / 31 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KRISTIN KLEY**

Mailing Address 4879 PRESTWICK SOUTH CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.128849**

Date of Receipt

**08 / 31 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 898 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD KLEY**

Mailing Address 4879 PRESTWICK S. CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CADBURY

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123911**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD KLEY**

Mailing Address 4879 PRESTWICK S. CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CADBURY

Occupation  
SALES

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123912**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		21		2015

REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA KLINCK**

Mailing Address 5842 BRITTANY WOODS CIR

City	State	Zip Code
LOUISVILLE	KY	40222

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.123913**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 899 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LAWRENCE S KLOCK**

Mailing Address 1321 KIMMER COURT

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RUSSELL REYNOLDS ASS.

Occupation  
EXECUTIVE RECRUITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123915**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT KLOCKARS**

Mailing Address 1201 BRIDGET COURT

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WALWORTH STATE BANK

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123917**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMY KLOKNER**

Mailing Address 701 BRIAR HILL DR

City	State	Zip Code
WAUKESHA	WI	53188

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123919**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 900 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BOB KLUESENDORF**

Mailing Address **N6112 LYONS RD**

City

**BURLINGTON**

State

**WI**

Zip Code

**53105-2716**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123920**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BOB KLUESENDORF**

Mailing Address **N6112 LYONS RD**

City

**BURLINGTON**

State

**WI**

Zip Code

**53105-2716**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.123921**

Date of Receipt

**08 / 28 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BOB KLUESENDORF**

Mailing Address **N6112 LYONS RD**

City

**BURLINGTON**

State

**WI**

Zip Code

**53105-2716**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.123922**

Date of Receipt

**09 / 17 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**150.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 901 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL A KLUG**

Mailing Address **N2426 CHERRY RD**

City <b>RUBICON</b>	State <b>WI</b>	Zip Code <b>53078</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.123924**

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS KLUMB**

Mailing Address **W25787715 PRAIRIESIDE D**

City <b>WAUKESHA</b>	State <b>WI</b>	Zip Code <b>53189</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.123926**

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET KLUTTZ**

Mailing Address **1765 SALEM CHURCH RD**

City <b>LINCOLNTON</b>	State <b>NC</b>	Zip Code <b>28092</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HARPER CORPORATION OF AMERIC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.123928**

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 902 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NORMAN KNAPP**

Mailing Address 1431 COUNTY ROAD 1700E

City	State	Zip Code
ROANOKE	IL	61561

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.123930**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ED KNEESE**

Mailing Address 13926 MARINE RD

City	State	Zip Code
MONTROSE	CO	81403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123932**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE KNEZEVICH**

Mailing Address 3624 46TH AVENUE SW

City	State	Zip Code
SEATTLE	WA	98116

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PACIFIC RIDGE MEDICAL

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123934**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 903 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREG KNIGHT**

Mailing Address 7840 N PHEASANT LANE

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
N/A

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123936**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALLIE KNOLL**

Mailing Address 200 WEST ELM STREET

City	State	Zip Code
STRATFORD	WI	54484

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123938**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELLEN KNOUSE**

Mailing Address 8335 RIVERBIRCH DRIVE

City	State	Zip Code
ROSWELL	GA	30076

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.00

**Transaction ID : SA17A.123939**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

103.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

603.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 904 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGORY KNOWLES**

Mailing Address 578 SUNSET DR

City	State	Zip Code
MEADVILLE	PA	16335

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123940**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TRUE KNOWLES**

Mailing Address 3831 TURTLE CREEK BL

City	State	Zip Code
DALLAS	TX	75219

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123942**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID KNUDSEN**

Mailing Address 23 SUMMIT RD

City	State	Zip Code
GRAY	ME	04039

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.123944**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	5

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 905 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CYNTHIA A KNUDSON**

Mailing Address 5812 COLWELL RD

City	State	Zip Code
PENRYN	CA	95663

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123946**

Date of Receipt

**08 / 11 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CYNTHIA A KNUDSON**

Mailing Address 5812 COLWELL RD

City	State	Zip Code
PENRYN	CA	95663

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123947**

Date of Receipt

**08 / 11 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT KNUDSON**

Mailing Address 5812 COLWELL ROAD

City	State	Zip Code
PENRYN	CA	95663

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123949**

Date of Receipt

**08 / 11 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 906 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MORGAN KNULL**

Mailing Address PO BOX 15155

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123951**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**STEVEN R KNUTH**

Mailing Address 887 HIGHLANDER TRAIL

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PUBLIC AFFAIRS CO**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123953**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STEVEN R KNUTH**

Mailing Address 887 HIGHLANDER TRAIL

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PUBLIC AFFAIRS CO**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123955**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

8100.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 907 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN R KNUTH**

Mailing Address 887 HIGHLANDER TRAIL

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PUBLIC AFFAIRS CO

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123955.0**

Date of Receipt

**08 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JENNIFER KNUTH**

Mailing Address 887 HIGHLANDER TRL

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
JOHNSON & JOHNSON

Occupation  
ADMINISTRATIVE ASSISTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123955.1**

Date of Receipt

**08 / 20 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS E KNUTSON, J**

Mailing Address 52 CATERA CT

City	State	Zip Code
MARTINSBURG	WV	25403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123957**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 908 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KRISTIN KOCAN**

Mailing Address 27W179 GALUSHA AVE

City	State	Zip Code
WARRENVILLE	IL	60555

FEC ID number of contributing federal political committee.

C

Name of Employer  
AT&T

Occupation  
ENGINEER MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123959**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL D KOCH**

Mailing Address 5374 MOONLITE DR

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123961**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICK KOCH**

Mailing Address 36 S HUDSON STREET

City	State	Zip Code
SEATTLE	WA	98134

FEC ID number of contributing federal political committee.

C

Name of Employer  
ALL CITY FENCE CO

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123963**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 909 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHERRI KOELBEL**

Mailing Address 4835 S. GAYLORD STREET

City	State	Zip Code
CHERRY HILLS VILAGE	CO	80113

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123965**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AARON KOELSCH**

Mailing Address 4904 KEATING ROAD NW

City	State	Zip Code
OLYMPIA	WA	98502

FEC ID number of contributing federal political committee.

C

Name of Employer  
KOELSCH SENIOR COMMUNITIES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

**Transaction ID : SA17A.123967**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEROME J KOHEL**

Mailing Address 5544 GULL PRAIRIE WA

City	State	Zip Code
KALAMAZOO	MI	49048

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123969**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 910 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRY J KOHLER**

Mailing Address 630 RIVERFRONT DR

City

SHEBOYGAN

State

WI

Zip Code

53081-4629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

WINDWAY CAPITAL CORP

Occupation

PRES/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

**Transaction ID : SA17A.123975**

Date of Receipt

**07** / **10** / **2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

5500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERRY J KOHLER**

Mailing Address 630 RIVERFRONT DR

City

SHEBOYGAN

State

WI

Zip Code

53081-4629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

WINDWAY CAPITAL CORP

Occupation

PRES/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

**Transaction ID : SA17A.123975.0**

Date of Receipt

**07** / **10** / **2015**

REATTRIBUTION TO MARY KOHLER

Amount of Each Receipt this Period

-2750.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY KOHLER**

Mailing Address 630 RIVERFRONT DR

City

SHEBOYGAN

State

WI

Zip Code

53081

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

WINDWAY FOUNDATION

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

**Transaction ID : SA17A.123975.1**

Date of Receipt

**07** / **10** / **2015**

REATTRIBUTION FROM TERRY KOHLER; SEE  
REDESIGNATION

Amount of Each Receipt this Period

2750.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 911 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY KOHLER**

Mailing Address 630 RIVERFRONT DR

City	State	Zip Code
SHEBOYGAN	WI	53081

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINDWAY FOUNDATION

Occupation  
VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123975.2**

Date of Receipt

**07** / **10** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-50.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY KOHLER**

Mailing Address 630 RIVERFRONT DR

City	State	Zip Code
SHEBOYGAN	WI	53081

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINDWAY FOUNDATION

Occupation  
VICE PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

**Transaction ID : SA17A.123975.3**

Date of Receipt

**07** / **10** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

50.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TERRY J KOHLER**

Mailing Address 630 RIVERFRONT DR

City	State	Zip Code
SHEBOYGAN	WI	53081-4629

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINDWAY CAPITAL CORP

Occupation  
PRES/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123975.4**

Date of Receipt

**07** / **10** / **2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-50.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 912 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRY J KOHLER**

Mailing Address 630 RIVERFRONT DR

City	State	Zip Code
SHEBOYGAN	WI	53081-4629

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINDWAY CAPITAL CORP

Occupation  
PRES/CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

**Transaction ID : SA17A.123975.5**

Date of Receipt

**07 / 10 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

50.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERRY J KOHLER**

Mailing Address 630 RIVERFRONT DR

City	State	Zip Code
SHEBOYGAN	WI	53081-4629

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINDWAY CAPITAL CORP

Occupation  
PRES/CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8150.00

**Transaction ID : SA17A.123979**

Date of Receipt

**09 / 23 / 2015**

REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD KOHN**

Mailing Address 3403 S 46TH STREET

City	State	Zip Code
LINCOLN	NE	68506

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123981**

Date of Receipt

**08 / 24 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 913 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANITA KOLB**

Mailing Address 1703 PEARL ST

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WI EAR MOLD CO

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123983**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICIA KOLBER**

Mailing Address 70 WEST MADISON STREET

City	State	Zip Code
CHICAGO	IL	60602

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123985**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VINCENT A KOLBER**

Mailing Address 70 W MADISON STREET, SU

City	State	Zip Code
CHICAGO	IL	60602

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RESIDCO

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.123987**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 914 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**VINCENT A KOLBER**

Mailing Address 70 W MADISON STREET, SU

City	State	Zip Code
CHICAGO	IL	60602

FEC ID number of contributing federal political committee.

C

Name of Employer  
RESIDCO

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.123988**

Date of Receipt

MM / DD / YYYY  
08 / 10 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHEILA KOMAREK**

Mailing Address 1417 SPYGLASS CT

City	State	Zip Code
ITASCA	IL	60143

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.123989**

Date of Receipt

MM / DD / YYYY  
07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOEL KONICEK**

Mailing Address 6810 HOODS CREEK ROAD

City	State	Zip Code
FRANKSVILLE	WI	53126

FEC ID number of contributing federal political committee.

C

Name of Employer  
BRIDGESTONE CAPITAL LLC

Occupation  
0

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123991**

Date of Receipt

MM / DD / YYYY  
07 / 17 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 915 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH KONIG**

Mailing Address 1915 HIGHLAND AVE

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GREATER MILWAUKEE COIN

Occupation  
COIN DEALER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123993**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRIS AND KRISTEN KOPINSKI**

Mailing Address 717 PATRICIA STREET

City	State	Zip Code
WASHINGTON	IL	61571

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CATERPILLAR

Occupation  
SUPPLY CHAIN MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.123995**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL KORMAN**

Mailing Address 6113 BEARD AVE S

City	State	Zip Code
EDINA	MN	55410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KORMAN LLC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.123997**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 916 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL KORMAN**

Mailing Address 6113 BEARD AVE S

City	State	Zip Code
EDINA	MN	55410

FEC ID number of contributing federal political committee.

C

Name of Employer  
KORMAN LLC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.123998**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL KORMAN**

Mailing Address 6113 BEARD AVE S

City	State	Zip Code
EDINA	MN	55410

FEC ID number of contributing federal political committee.

C

Name of Employer  
KORMAN LLC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.123999**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL KORMAN**

Mailing Address 6113 BEARD AVE S

City	State	Zip Code
EDINA	MN	55410

FEC ID number of contributing federal political committee.

C

Name of Employer  
KORMAN LLC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

**Transaction ID : SA17A.124000**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 917 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD KORPAN**

Mailing Address 31483 MORNING STAR DR.

City	State	Zip Code
EVERGREEN	CO	80439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124002**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD KORPAN**

Mailing Address 31483 MORNING STAR DR.

City	State	Zip Code
EVERGREEN	CO	80439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124003**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			17			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KATHY KORT**

Mailing Address 2730 WILLOW POINT DR

City	State	Zip Code
DELAN	WI	53115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124005**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ADAM KOSLOSKY**

Mailing Address 13708 CUMING STREET

City	State	Zip Code
OMAHA	NE	68154

FEC ID number of contributing federal political committee.

C

Name of Employer  
MAGNOLIA METAL CORP.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124007**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL KOSLOSKY**

Mailing Address P.O. BOX 181

City	State	Zip Code
NEBRASKA CITY	NE	68410

FEC ID number of contributing federal political committee.

C

Name of Employer  
MAGNOLIA METAL CORP.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124009**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PIERCE KOSLOSKY JR**

Mailing Address 12908 BINNEY STREET

City	State	Zip Code
OMAHA	NE	68164

FEC ID number of contributing federal political committee.

C

Name of Employer  
MAGNOLIA METAL CORPORATION

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124011**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 919 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY KOSS**

Mailing Address 1492 WCALURNET COURT

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124013**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NICOLE KOSTELNIK**

Mailing Address 605 HWY 87 NORTH  
P.O. BOX 99

City	State	Zip Code
COMFORT	TX	78013-0099

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124015**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEITH KOSTUCH**

Mailing Address 4511 LAKEVIEW DR

City	State	Zip Code
EDINA	MN	55424

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT AND INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124017**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 920 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAFNI KOTHARI**

Mailing Address **11 WALNUT STREET**

City	State	Zip Code
LEXINGTON	MA	02421

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124019**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SP KOTHARI**

Mailing Address **11 WALNUT STREET**

City	State	Zip Code
LEXINGTON	MA	02421

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIT**

Occupation  
**PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124021**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEMETRIOS KOUZOUKAS**

Mailing Address **15552 57TH PLACE N**

City	State	Zip Code
PLYMOUTH	MN	55446

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124023**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFFREY KOWAL**

Mailing Address **W343N6229 S BAYVIEW**

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124025**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDITH KOZACIK**

Mailing Address **7 WIRT STREET NW**

City	State	Zip Code
LEESBURG	VA	20176

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124027**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARREN KOZITZA**

Mailing Address **N8805 1060TH ST**

City	State	Zip Code
RIVER FALLS	WI	54022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REIS IN AGENCY**

Occupation  
**INSURANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124029**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 922 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY M KOZNICK**

Mailing Address 1111 E MCCOY BLVD

City	State	Zip Code
TOMAH	WI	54660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124031**

Date of Receipt

**07** / **22** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RANDY KOZUCH**

Mailing Address 706 ROSE SQ

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NATIONAL RIFLE ASSOCIATION

Occupation  
DIRECTOR OF POLITICAL AFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124033**

Date of Receipt

**07** / **17** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES W KRAEMER**

Mailing Address 335 PARK LN

City	State	Zip Code
LAKE BLUFF	IL	60044

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INSURANCE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124034**

Date of Receipt

**08** / **12** / **2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1350.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 923 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH KRAEMER**

Mailing Address **W293N7383 TAMRON LANE**

City <b>HARTLAND</b>	State <b>WI</b>	Zip Code <b>53029</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WISCONSIN METALWORKING**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124036**

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KYLE J KRAEMER**

Mailing Address **S12425 GARDEN PATH**

City <b>SPRING GREEN</b>	State <b>WI</b>	Zip Code <b>53588</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KRAEMER BROTHERS**

Occupation  
**GENERAL CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124038**

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL KRAEMER**

Mailing Address **8613 S PARKLAND CT**

City <b>FRANKLIN</b>	State <b>WI</b>	Zip Code <b>53132</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE STARR GROUP**

Occupation  
**INSURANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124040**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 924 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HAROLD KRAFT**

Mailing Address 4100 NEWPORT PLACE D

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FINANCIAL ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124042**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOM KRAMER**

Mailing Address 925 PARK AVE

City	State	Zip Code
PLAIN	WI	53577

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KRAEMER BROTHERS**

Occupation  
**GENERAL CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124044**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM KRAMER**

Mailing Address 2626 HOWELL ST FL 10

City	State	Zip Code
DALLAS	TX	75204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**REPUBLIC TITLE OF TEXAS INC**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124046**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 925 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES KRAUSE**

Mailing Address 265 OLD DUBLIN RD

City	State	Zip Code
PETERBOROUGH	NH	03458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTMENT ADVISER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124048**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK KRAUSE**

Mailing Address 20565 CHADWICK LANE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KRAUSE FUNERAL HOMES

Occupation  
FUNERAL DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124050**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GERRY KREBSBACH**

Mailing Address N5224 COUNTRY AIRE ROSD

City	State	Zip Code
PLYMOUTH	WI	53073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KW ELECTRIC INC.

Occupation  
ELECTRICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124052**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 926 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATTHEW KREMER**

Mailing Address 4909 MURPHY CANYON ROAD, SUITE 220

City	State	Zip Code
SAN DIEGO	CA	92123

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124054**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH KRESL**

Mailing Address 12600 GREMOOR DRIVE

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HAWKS NURSERY**

Occupation  
**LANDSCAPE ARCHITECT/OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124056**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD F KRESS**

Mailing Address P.O. BOX 11564

City	State	Zip Code
GREEN BAY	WI	54307

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124058**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 927 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID KREUSER**

Mailing Address 3960 CROYDON RD.

City	State	Zip Code
PENSACOLA	FL	32514

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124060**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID KREUSER**

Mailing Address 3960 CROYDON RD.

City	State	Zip Code
PENSACOLA	FL	32514

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

258.00

**Transaction ID : SA17A.124061**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2015

Amount of Each Receipt this Period

8.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH R KRIER**

Mailing Address 15060 CADILLAC DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78248

FEC ID number of contributing federal political committee.

C

Name of Employer  
KCGI INC.

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124063**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

758.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 928 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL KRIOZERE**

Mailing Address 6335 EL CAMINO DEL TEATRO

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.124065**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS KRIST**

Mailing Address 1798 WHITE PINE TRAIL

City	State	Zip Code
RICHFIELD	WI	53076

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124067**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			02			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICK KRIVA**

Mailing Address 1063 ACORN WAY

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HONEYWELL

Occupation  
VP GLOBAL REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124069**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1470.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 929 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARJORIE KRIZEK**

Mailing Address **PO BOX 477**

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124071**

Date of Receipt

**07** / **09** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RONALD KRIZEK**

Mailing Address **1815 WEDGEWOOD DR E**

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE KRIZEK GROUP**

Occupation  
**BUSINESS SUCCESSION & ESTATE PLA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124073**

Date of Receipt

**07** / **09** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RONALD KRIZEK**

Mailing Address **1815 WEDGEWOOD DR E**

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE KRIZEK GROUP**

Occupation  
**BUSINESS SUCCESSION & ESTATE PLA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124074**

Date of Receipt

**07** / **09** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 930 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM J KROCHALIS**

Mailing Address 918 TYNER WAY

City	State	Zip Code
INCLINE VILLA	NV	89451

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124076**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLY KRUSELL**

Mailing Address 1060 LAKESHORE BLVD

City	State	Zip Code
INCLINE VILLAGE	NV	89451

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124078**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD KRUSLING**

Mailing Address 227 ROCK CRYSTAL LANE

City	State	Zip Code
LAKESIDE PARK	KY	41017

FEC ID number of contributing federal political committee.

C

Name of Employer  
ST. ELIZABETH PHYSICIANS

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124080**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3950.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 931 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BILLIE W KUBLY**

Mailing Address 1442 GALLEON DRIVE

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANE KUCKS**

Mailing Address PO BOX 1386

City	State	Zip Code
EAST ORLEANS	MA	02643

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124083**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES KUDERA**

Mailing Address 1130 PANORAMA DR

City	State	Zip Code
COVINGTON	KY	41011

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124085**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 932 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGORY KUKULSKI**

Mailing Address 2427 CHIPPEWA COURT

City	State	Zip Code
LISLE	IL	60532

FEC ID number of contributing federal political committee.

C

Name of Employer  
LINN MATHAS INC

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

**Transaction ID : SA17A.124086**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

275.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH KULIFAY**

Mailing Address PO BOX 18099

City	State	Zip Code
FAIRFIELD	OH	45018

FEC ID number of contributing federal political committee.

C

Name of Employer  
BRONCO EXCAVATING INC

Occupation  
CONSTRUCTION SUPERVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124088**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J EDWARD KULTGEN**

Mailing Address PO BOX 28

City	State	Zip Code
WACO	TX	76703

FEC ID number of contributing federal political committee.

C

Name of Employer  
BIRD-KULTGEN, INC.

Occupation  
AUTO DEALER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124089**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

625.00

**Total This Period (last page this line number only)** .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 933 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH KUMERLE**

Mailing Address 3317 CONSERVANCY LN

City	State	Zip Code
CHARLESTON	SC	29414

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

**Transaction ID : SA17A.124090**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

35.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH KUMERLE**

Mailing Address 3317 CONSERVANCY LN

City	State	Zip Code
CHARLESTON	SC	29414

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.124091**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	5

Amount of Each Receipt this Period

20.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED S KUMMER**

Mailing Address 11 SQUIRES LN

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HBE CORP

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.124093**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10855.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 934 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED S KUMMER**

Mailing Address 11 SQUIRES LN

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HBE CORP

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124094**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED S KUMMER**

Mailing Address 11 SQUIRES LN

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HBE CORP

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124095**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED S KUMMER**

Mailing Address 11 SQUIRES LN

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HBE CORP

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124096**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 935 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JUNE KUMMER**

Mailing Address **11 SQUIRES LN**

City State Zip Code  
**SAINT LOUIS MO 63131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124098**

Date of Receipt

**07 / 24 / 2015**

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JUNE KUMMER**

Mailing Address **11 SQUIRES LN**

City State Zip Code  
**SAINT LOUIS MO 63131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124099**

Date of Receipt

**07 / 24 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JUNE KUMMER**

Mailing Address **11 SQUIRES LN**

City State Zip Code  
**SAINT LOUIS MO 63131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124100**

Date of Receipt

**07 / 24 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**0.00**

**Total This Period** (last page this line number only) .....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 936 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****KEN KUMMER**

Mailing Address 27281 LAKEWAY CT.

City	State	Zip Code
BONITA SPRINGS	FL	34134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ABRASIVE FORM INCOccupation  
MFG.

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124101**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****MAXINE KUNKEL**

Mailing Address 1490 SW FLOUNDER LANE

City	State	Zip Code
PORT ST LUCIE	FL	34953

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124102**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****THORNTON KUNTZ, JR.**

Mailing Address 3650 TARN COURT

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MIMEDX GROUP, INCOccupation  
SR. VICE PRESIDENT ADMINISTRATION

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124104**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 937 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAN L KUNZ**

Mailing Address **N2151 SUNSET LN**

City	State	Zip Code
LA CROSSE	WI	54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124106**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VICKY L KUNZ**

Mailing Address **N2151 SUNSET LN**

City	State	Zip Code
LA CROSSE	WI	54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124108**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VICKY L KUNZ**

Mailing Address **N2151 SUNSET LN**

City	State	Zip Code
LA CROSSE	WI	54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124109**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 938 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RAYMOND KURLAK**

Mailing Address **27 FENNELL ST, B208**

City <b>SKANEATELES</b>	State <b>NY</b>	Zip Code <b>13152</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124111**

Date of Receipt

M M / D D / Y Y Y Y
06 / 24 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET KUSKA**

Mailing Address **13849 SUNBURST DRIVE**

City <b>BIGFORK</b>	State <b>MT</b>	Zip Code <b>59911</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124112**

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD KUTLER**

Mailing Address **6405 TREE TOP CIRCLE**

City <b>COLUMBIA</b>	State <b>MD</b>	Zip Code <b>21045</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MERCURY**

Occupation  
**LOBBYIST/CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124114**

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 939 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**BRUCE LABOON**

Mailing Address PO BOX 1249

City State Zip Code  
FREDERICKSBUR TX 78624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LOCKE LORD BISSELL & LIDDELL

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124116**

Date of Receipt

M M / D D / Y Y Y Y  
07 30 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT LABRASH**

Mailing Address 2590 COHANSEY ST.

City State Zip Code  
ROSEVILLE MN 55113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124117**

Date of Receipt

M M / D D / Y Y Y Y  
07 19 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**VICTORIA LA CROIX**

Mailing Address 5139 BAILEY ROAD

City State Zip Code  
DELAN VAN WI 53115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124119**

Date of Receipt

M M / D D / Y Y Y Y  
08 12 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1750.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 940 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GORDON LAHTI**

Mailing Address 1177 CALIFORNIA STREET  
#1212

City State Zip Code  
SAN FRANCISCO CA 94108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SWISS REINSURANCE AMERICA

Occupation  
MARKETING EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124121**

Date of Receipt

M M / D D / Y Y Y Y  
07 22 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GORDON LAHTI**

Mailing Address 1177 CALIFORNIA STREET  
#1212

City State Zip Code  
SAN FRANCISCO CA 94108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SWISS REINSURANCE AMERICA

Occupation  
MARKETING EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

**Transaction ID : SA17A.124122**

Date of Receipt

M M / D D / Y Y Y Y  
08 10 2015

Amount of Each Receipt this Period

60.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RIMA LAL**

Mailing Address 4195 CHAPEL HILL COURT

City State Zip Code  
BROOKFIELD WI 53045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128717**

Date of Receipt

M M / D D / Y Y Y Y  
07 10 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

310.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 941 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**VISHAL LAL**

Mailing Address **4195 CHAPEL HILL COURT**

City <b>BROOKFIELD</b>	State <b>WI</b>	Zip Code <b>53045</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ADVANCE**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124124**

Date of Receipt

**07 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VISHAL LAL**

Mailing Address **4195 CHAPEL HILL COURT**

City <b>BROOKFIELD</b>	State <b>WI</b>	Zip Code <b>53045</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ADVANCE**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128715**

Date of Receipt

**07 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY LAMANDO**

Mailing Address **7710 ALBORZ DR**

City <b>RALEIGH</b>	State <b>NC</b>	Zip Code <b>27612</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**HOME INSPECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124126**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 942 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT LAMB**

Mailing Address 119 CARTERWOODS DR

City	State	Zip Code
WARNER ROBINS	GA	31088

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124128**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS LAMERS**

Mailing Address 1445 MCMAHON DR

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCMAHON

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124130**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD LANDIS**

Mailing Address 5790 MIDNIGHT PASS ROAD, 601A

City	State	Zip Code
SARASOTA	FL	34242

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124132**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 943 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWIN LANDON**

Mailing Address **537 WESTMOUNT LN**

City <b>VENICE</b>	State <b>FL</b>	Zip Code <b>34293-4427</b>
-----------------------	--------------------	-------------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124134**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 14 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEAN LANDREMAN**

Mailing Address **528 E 14TH STREET**

City <b>KAUKAUNA</b>	State <b>WI</b>	Zip Code <b>54130</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LANDREMAN'S FAMILY REST**

Occupation  
**CO-OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124136**

Date of Receipt

M M / D D / Y Y Y Y
<b>08 / 12 / 2015</b>

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN LANDRUM**

Mailing Address **2405 BRAZORIA ST**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77019</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MHP INVESTORS LLC**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124138**

Date of Receipt

M M / D D / Y Y Y Y
<b>08 / 13 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 944 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENDAN LANE**

Mailing Address **25-41 30TH ROAD, APT 1B**

City	State	Zip Code
ASTORIA	NY	11102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124140**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRITT LANE**

Mailing Address **4655 SIDONIA CT**

City	State	Zip Code
FT WORTH	TX	76126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BOBBY COX COMPANIES**

Occupation  
**RETAILER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124142**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARVIN LANE**

Mailing Address **7715 FALLMEADOW LANE**

City	State	Zip Code
DALLAS	TX	75248

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124144**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANNE LANG**

Mailing Address 100 E BELLEVUE #25F

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

C

Name of Employer  
LAW

Occupation  
HR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124146**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GORDON E LANG**

Mailing Address 5124 N ARDMORE AVE

City	State	Zip Code
WHITEFISH BAY	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124147**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GORDON E LANG**

Mailing Address 5124 N ARDMORE AVE

City	State	Zip Code
WHITEFISH BAY	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

810.00

**Transaction ID : SA17A.124148**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

210.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1210.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 946 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK LANGENBAHN**

Mailing Address **773 MAIDSTONE CT**

City	State	Zip Code
CINCINNATI	OH	45230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SUN**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124150**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SAM LANGFORD**

Mailing Address **17972 S. 25TH EAST AVE**

City	State	Zip Code
MOUNDS	OK	74047

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124152**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KARL LANGKAMP**

Mailing Address **10725 N 151ST EAST A**

City	State	Zip Code
OWASSO	OK	74055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BP**

Occupation  
**PIPELINE CONTROLLER SHIFT LEAD**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124153**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONNA LANGMAN**

Mailing Address 2109 INDIAN CREEK DR

City	State	Zip Code
MANITOWOC	WI	54220

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BUSINESS OWNER**

Occupation  
**BROWNS OF TWO RIVERS INC.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124155**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDY LAPORA**

Mailing Address 27010 N 52ND GLN

City	State	Zip Code
PHOENIX	AZ	85083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124156**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREW LAPPIN**

Mailing Address 630 LINCOLN AVE

City	State	Zip Code
GLENCOE	IL	60022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124158**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 948 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER LARDNER**

Mailing Address 2828 96TH AVENUE CT

City	State	Zip Code
MILAN	IL	61264

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LEE ENTERPRISES, INC**

Occupation  
**BUSINESS INTELLIGENCE ANALYST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124160**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL LARISH**

Mailing Address 2600 PUALANI WAY

City	State	Zip Code
HONOLULU	HI	96815

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.124161**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEVIN LARKIN**

Mailing Address 28655 OLD TOWNE ROAD

City	State	Zip Code
CHISAGO CITY	MN	55013

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**POWER DYNAMICS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124163**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 949 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY LARKIN**

Mailing Address W3170 S LAKESHORE DR

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124165**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.124167**

Date of Receipt

**07 / 15 / 2015**

REATTRIBUTION FROM TOM LARKIN; SEE REDESIGNATION

Amount of Each Receipt this Period

5000.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124168**

Date of Receipt

**07 / 15 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.124169**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOM LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TOMMAR LLC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

**Transaction ID : SA17A.124171**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TOMMAR LLC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.124172**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

REATTRIBUTION TO MARGARET LARKIN

Amount of Each Receipt this Period

-5000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TOM LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TOMMAR LLC**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124173**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOM LARKIN**

Mailing Address PO BOX 19751

City	State	Zip Code
IRVINE	CA	92623

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TOMMAR LLC**

Occupation  
**MANAGER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.124174**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

**REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015**

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENISE M LARR**

Mailing Address 455 SLATE RUN DRIVE

City	State	Zip Code
POWELL	OH	43065

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LARR POLICY CONSULTING**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124176**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 952 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEN LARSEN**

Mailing Address 13733 47TH AVENUE WEST

City	State	Zip Code
RAPID CITY	SD	57702-6524

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124178**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DELBERT LARSON**

Mailing Address 2294 STARFLOWER TRAIL

City	State	Zip Code
BULLHEAD CITY	AZ	86442

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.124180**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA J LARSON**

Mailing Address W148N7739 MENOMONEE

City	State	Zip Code
MENOMONEE FAL	WI	53051

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124182**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 953 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD LARSON**

Mailing Address 4920 S LOWES CREEK R

City	State	Zip Code
EAU CLAIRE	WI	54701

FEC ID number of contributing federal political committee.

C

Name of Employer  
LARSON DEVELOPMENT

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124184**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 05 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHERRILL A LARSON**

Mailing Address 13510 BRAEMAR DRIVE

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124186**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HELEN LASERSOHN**

Mailing Address 304 NORTH AVE

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124188**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 954 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS LASERSON**

Mailing Address 304 NORTH AVE

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124190**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS LASERSON**

Mailing Address 304 NORTH AVE

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124191**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ELMER LASHUA**

Mailing Address 70 OAK ST

A

City	State	Zip Code
TRYON	NC	28782

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

201.00

**Transaction ID : SA17A.124192**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

126.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5526.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 955 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELMER LASHUA**

Mailing Address 70 OAK ST

A

City

TRYON

State

NC

Zip Code

28782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

276.00

**Transaction ID : SA17A.124193**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELMER LASHUA**

Mailing Address 70 OAK ST

A

City

TRYON

State

NC

Zip Code

28782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

351.00

**Transaction ID : SA17A.124194**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**POLLY LASICH**

Mailing Address 3800 DUPONT CIRCLE UNIT 306

City

VIRGINIA BEACH

State

VA

Zip Code

23455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124196**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 956 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EVA LASKARIS**

Mailing Address **31 CLARE ISLE DRIVE**

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124198**

Date of Receipt

**08 / 03 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NICKOLAO LASKARIS**

Mailing Address **P.O. BOX 5**

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BIG CHIEF ENTERPRISES, INC.

Occupation  
RESORT OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124200**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NICKOLAO LASKARIS**

Mailing Address **P.O. BOX 5**

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BIG CHIEF ENTERPRISES, INC.

Occupation  
RESORT OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124201**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 957 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ED LASTER**

Mailing Address **7700 GREENWAY F301**

City	State	Zip Code
DALLAS	TX	75209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124203**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID LATCHFORD**

Mailing Address **17210 CAMPBELL RD**

City	State	Zip Code
DALLAS	TX	75252

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**US OPERATING**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124205**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BENNY LATHAM**

Mailing Address **404 RIVERVIEW DR.**

City	State	Zip Code
GEORGETOWN	TX	78628

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124207**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3450.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 958 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM P LATIMER**

Mailing Address 218 HOMESTEAD RD

City	State	Zip Code
ALSTEAD	NH	03602

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124209**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETER LAUER**

Mailing Address 118 BLACKLAND RD.

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PEL V

Occupation  
VENTURE INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124211**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ILENE LAUFMAN**

Mailing Address 317 EVERGLADE DRIVE

City	State	Zip Code
MADISON	WI	53717

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128692**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 959 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK LAUFMAN**

Mailing Address 317 EVERGLADE DRIVE

City	State	Zip Code
MADISON	WI	53717

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124213**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK LAUFMAN**

Mailing Address 317 EVERGLADE DRIVE

City	State	Zip Code
MADISON	WI	53717

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128690**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT LAUTER**

Mailing Address 9 ATLANTIC AVE

City	State	Zip Code
NORTH HAMPTON	NH	03862

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MASTER SPAS INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124215**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 960 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT LAVENDER**

Mailing Address 1781 PINE LANE

City	State	Zip Code
PROVO	UT	84604

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124217**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TREVOR LAVY**

Mailing Address 5158 TURNHOUSE CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124219**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID LAWLER**

Mailing Address 21124 SKIDMORE TERRACE, APT 216

City	State	Zip Code
STERLING	VA	20166

FEC ID number of contributing federal political committee.

C

Name of Employer  
RAYTHEON

Occupation  
CHIEF ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124221**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID LAWLER**

Mailing Address 21124 SKIDMORE TERRACE, APT 216

City	State	Zip Code
STERLING	VA	20166

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RAYTHEON

Occupation  
CHIEF ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

470.00

**Transaction ID : SA17A.124222**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BYRON H LAWRENCE**

Mailing Address 426 SPENCER AVENUE

City	State	Zip Code
LANCASTER	PA	17603

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124223**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CONNIE LAWRENCE**

Mailing Address 15 PASSAGE LANE

City	State	Zip Code
SALEM	SC	29676

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124225**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

620.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 962 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE LAWRENCE**

Mailing Address 725 SANDFLY LANE

City State Zip Code  
VERO BEACH FL 32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124227**

Date of Receipt

M M / D D / Y Y Y Y  
07 24 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL R LAWRENCE**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124229**

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID LAWSON**

Mailing Address 279 PINE NEEDLE CIR

City State Zip Code  
GASTON SC 29053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124231**

Date of Receipt

M M / D D / Y Y Y Y  
06 22 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 963 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRUCE LEACH**

Mailing Address 10724 SMALLWOOD AVE

City	State	Zip Code
DOWNEY	CA	90241

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LEACH GRAIN AND MILLINGS CO INC.**

Occupation  
**MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124233**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARLENE LEAK**

Mailing Address 9904 E. 21ST PLACE

City	State	Zip Code
TULSA	OK	74129

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WALMART**

Occupation  
**PHARMACY OTC ASSISTANT/LANDLORD**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124235**

Date of Receipt

**08 / 02 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM S LEAR**

Mailing Address 100 E BELLEVUE PL APT 2

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE CHICAGO CORPORATION**

Occupation  
**SENIOR ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124237**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 964 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIMITY LEATH**

Mailing Address 4405 OLD BROOK RUN

City	State	Zip Code
BIRMINGHAM	AL	35243

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124239**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEBORA LEATHERMAN**

Mailing Address 11401 SW 87TH AVE

City	State	Zip Code
MIAMI	FL	33176

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124241**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL LECKMAN**

Mailing Address 115 171ST PL SE

City	State	Zip Code
BOTHELL	WA	98012

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.124243**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1725.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 965 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA LECKY**

Mailing Address 5380 COUNTY ROAD 400

City MILLERSBURG	State OH	Zip Code 44654
---------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124244**

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVE LEDWELL**

Mailing Address 3300 WACO ST

City TEXARKANA	State TX	Zip Code 75501
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LEDWELL AND SON

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124246**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BONNIE B LEE**

Mailing Address 2477 NORTH 91ST STREET

City WAUWATOSA	State WI	Zip Code 53226
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124248**

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 966 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BONNIE B LEE**

Mailing Address **2477 NORTH 91ST STREET**

City <b>WAUWATOSA</b>	State <b>WI</b>	Zip Code <b>53226</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.124249**

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BONNIE B LEE**

Mailing Address **2477 NORTH 91ST STREET**

City <b>WAUWATOSA</b>	State <b>WI</b>	Zip Code <b>53226</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2250.00**

**Transaction ID : SA17A.124250**

Date of Receipt

M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GENEVA M LEE**

Mailing Address **320 LEE ST APT 501**

City <b>OAKLAND</b>	State <b>CA</b>	Zip Code <b>94610</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.124251**

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 967 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES LEE**

Mailing Address 2509 N BOSWORTH AVE

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer  
KENSINGTON REALTY ADVISORS

Occupation  
INVESTMENT ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124253**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOAN LEE**

Mailing Address 2502 HARBOR CT

City	State	Zip Code
FORT MYERS	FL	33908

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124254**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LADONNA LEE**

Mailing Address 4216 FILTER PLANT ROAD

City	State	Zip Code
BELLVUE	CO	80512

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124256**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 968 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**TIM LEE**

Mailing Address 3507 LOUPE CT

City	State	Zip Code
MISSOURI CITY	TX	77459

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124258**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JACQUELYN LEEDLE**

Mailing Address N474 ARMSBY ROAD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124260**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARGARET B LEEF**

Mailing Address W284 N5061 ROOSEVELT'S

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124262**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 969 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRUCE A LEFAVI**

Mailing Address 2323 SOUTH FOOTHILL DRI

City	State	Zip Code
SALT LAKE CIT	UT	84109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LEFAVI WEALTH MANAGEMENT

Occupation  
FINANCIAL PLANNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124264**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT LEGGETT**

Mailing Address 6536 CORINTIA STREET

City	State	Zip Code
CARLSBAD	CA	92009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SURGERY ONE LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124266**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELROY LEHMANN**

Mailing Address 6417 W KENSINGTON RD

City	State	Zip Code
OKLAHOMA CITY	OK	73132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124268**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 970 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELROY LEHMANN**

Mailing Address **6417 W KENSINGTON RD**

City	State	Zip Code
OKLAHOMA CITY	OK	73132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17A.124269**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELROY LEHMANN**

Mailing Address **6417 W KENSINGTON RD**

City	State	Zip Code
OKLAHOMA CITY	OK	73132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1100.00**

**Transaction ID : SA17A.124270**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER LEIDEL**

Mailing Address **1422 PRIVATE ROAD 11**

City	State	Zip Code
DIME BOX	TX	77853

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YORKTOWN PARTNERS LLC**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124272**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 971 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM LEIGHTON**

Mailing Address 5733 SHADY RIVER DR

City	State	Zip Code
HOUSTON	TX	77057

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GREATER HOUSTON ANESTHESIOLOGY**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124274**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER LEINES**

Mailing Address PO BOX 353

City	State	Zip Code
MEDINA	MN	55357

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MINNESOTA LIMITED**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128782**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER LEINES**

Mailing Address PO BOX 353

City	State	Zip Code
MEDINA	MN	55357

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MINNESOTA LIMITED**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124276**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 972 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WENDY LEINES**

Mailing Address PO BOX 353

City	State	Zip Code
MEDINA	MN	55357

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128784**

Date of Receipt

**06** / **18** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CRAIG LEIPOLD**

Mailing Address 555 MAIN STREET, STE 500

City	State	Zip Code
RACINE	WI	53403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MINNESOTA WILD NHL

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124278**

Date of Receipt

**06** / **30** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CRAIG LEIPOLD**

Mailing Address 555 MAIN STREET, STE 500

City	State	Zip Code
RACINE	WI	53403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MINNESOTA WILD NHL

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128737**

Date of Receipt

**06** / **30** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 973 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN R LEMMONS**

Mailing Address 1973 ROSE VALLEY ROAD

City	State	Zip Code
KELSO	WA	98626

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124280**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD LENDERMAN**

Mailing Address 936 SPINNAKERS REACH DRIVE

City	State	Zip Code
PONTE VEDRA BEACH	FL	32082

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124282**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CORDELIA LENZ**

Mailing Address 3261 FOSTERS BRANCH ROA

City	State	Zip Code
CHARLOTTESVIL	VA	22911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.124284**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

975.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 974 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CORDELIA LENZ**

Mailing Address 3261 FOSTERS BRANCH ROA

City	State	Zip Code
CHARLOTTESVIL	VA	22911

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.124285**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID LENZ**

Mailing Address PO BOX 620994

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NORTH CENTRAL GROUP

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

**Transaction ID : SA17A.124286**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DAVID LENZ**

Mailing Address PO BOX 620994

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NORTH CENTRAL GROUP

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : SA17A.124286.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5625.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 975 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KRIS LENZ**

Mailing Address P.O. BOX 66094

City

MIDDLETON

State

WI

Zip Code

53562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124286.1**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 14 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT J LEONARD**

Mailing Address 20203 CHERRY RD NW

City

SOAP LAKE

State

WA

Zip Code

98851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124287**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 01 / 2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY LEONETTI**

Mailing Address 2321 BOEGER AVE

City

WESTCHESTER

State

IL

Zip Code

60154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROLINE INSURANCE

Occupation

INSURANCE AGENT/OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

**Transaction ID : SA17A.63373**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

150.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 976 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEBRA LEONETTI**

Mailing Address 2321 BOEGER AVE

City	State	Zip Code
WESTCHESTER	IL	60154

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-150.00

**Transaction ID : SA17A.63375**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-150.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES LESTE**

Mailing Address 3437 VIA LOMA VIS

City	State	Zip Code
ESCONDIDO	CA	92029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124290**

Date of Receipt

**08** / **17** / **2015**

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM LESTER**

Mailing Address 3703 MOUNT AIREY LANE

City	State	Zip Code
ANNANDALE	VA	22003

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PROFESSIONAL ANALYSIS, INC.

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124292**

Date of Receipt

**07** / **14** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 977 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**J W LEVELL**

Mailing Address **2331 GUS THOMASSON, STE**

City	State	Zip Code
DALLAS	TX	75228

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FIRST SOUTHWEST PROPERTIES**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124294**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**J WAYMON LEVELL**

Mailing Address **3249 MARQUETTE ST.**

City	State	Zip Code
DALLAS	TX	75225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124296**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHALRES C LEVERETT**

Mailing Address **4204 PAGE ROAD**

City	State	Zip Code
MORRISVILLE	NC	27560

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124298**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 978 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES C LEVERETT**

Mailing Address 4204 PAGE RD

City	State	Zip Code
MORRISVILLE	NC	27560

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124300**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL LEVY**

Mailing Address 1051 VIA REGINA

City	State	Zip Code
SANTA BARBARA	CA	93111

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMERGENCY PHYSICIAN

Occupation  
0

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124302**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PHIL LEVY**

Mailing Address 2340 WOODPATH LN

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE CHICAGO COUNCIL ON GLOBAL  
AFFAIRS

Occupation  
ECONOMIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124304**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 979 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FERRIS LEWALD**

Mailing Address **61 FINGER AVENUE**

City	State	Zip Code
REDWOOD CITY	CA	94062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**210.00**

**Transaction ID : SA17A.124306**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

**210.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE LEWIS**

Mailing Address **3100 MONTICELLO AVENUE, SUITE 150**

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GEORGE LEWIS CUSTOM HOUSES**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124308**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN LEWIS**

Mailing Address **3510 TURTLE CREEK BLVD**

City	State	Zip Code
DALLAS	TX	75219

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PRIVATE INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124310**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1710.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 980 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS LEWIS**

Mailing Address **S83 W20671 JANESVILLE ROAD**

City	State	Zip Code
MUSKEGO	WI	53150

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
ASTRONAUTICS CORPORATION OF AMERICA	MECHANICAL DESIGNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.124311**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS LEWIS**

Mailing Address **S83 W20671 JANESVILLE ROAD**

City	State	Zip Code
MUSKEGO	WI	53150

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
ASTRONAUTICS CORPORATION OF AMERICA	MECHANICAL DESIGNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

**Transaction ID : SA17A.124312**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

20.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS LEWIS**

Mailing Address **S83 W20671 JANESVILLE ROAD**

City	State	Zip Code
MUSKEGO	WI	53150

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
ASTRONAUTICS CORPORATION OF AMERICA	MECHANICAL DESIGNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

**Transaction ID : SA17A.124313**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

145.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 981 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HELEN LHO**

Mailing Address 5300 WILLOW CREEK DRIVE

City	State	Zip Code
CEDAR RAPIDS	WI	52404

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PMX INDUSTRIES**

Occupation  
**VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124315**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWIN LIDDLE**

Mailing Address 888 PURDY STREET

City	State	Zip Code
BIRMINGHAM	MI	48009

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124317**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWIN LIDDLE**

Mailing Address 888 PURDY STREET

City	State	Zip Code
BIRMINGHAM	MI	48009

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.124318**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 982 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ARLENE F LIEBERMAN**

Mailing Address 12 30TH AVE

City

VENICE

State

CA

Zip Code

90291

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124320**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAND & E LIEN**

Mailing Address 645 SARI DR

City

LAS VEGAS

State

NV

Zip Code

89110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124322**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AARON LILLYBRIDGE**

Mailing Address 518 LAUREL AVENUE

City

WILMETTE

State

IL

Zip Code

60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124324**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 983 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LLOYD LIM**

Mailing Address 1525 WILDER AVENUE #1008

City	State	Zip Code
HONOLULU	HI	96822

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STATE IF HAWAII

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124326**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CINDY LIMBACH**

Mailing Address 3220 W WAUPECAN RD

City	State	Zip Code
VERONA	IL	60479

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EAGLE SKY PATROL

Occupation  
PILOT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124328**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFFREY W LIND**

Mailing Address 460 165TH AVE

City	State	Zip Code
SOMERSET	WI	54025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.124329**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 984 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE LINDEMANN**

Mailing Address 10417 LAKE RIDGE DRIVE

City	State	Zip Code
OAKTON	VA	22124

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124331**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFF LINDEMANN**

Mailing Address 3886 N ROSE MEADOW LANE

City	State	Zip Code
APPLETON	WI	54313

FEC ID number of contributing federal political committee.

C

Name of Employer  
LEE BEVERAGE

Occupation  
BEER DISTRIBUTION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124333**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID LINDENMAN**

Mailing Address 14808 FONTHILL AVE

City	State	Zip Code
HAWTHORNE	CA	90250

FEC ID number of contributing federal political committee.

C

Name of Employer  
NORTHRUP GRUMMAN

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

**Transaction ID : SA17A.124335**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 28 / 2015

Amount of Each Receipt this Period

425.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1175.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 985 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WAYNE LINDHOLM**

Mailing Address 25 VISTA MONTEMAR

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINDHOLM MANAGEMENT LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.124337**

Date of Receipt

**06 / 23 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WAYNE LINDHOLM**

Mailing Address 25 VISTA MONTEMAR

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINDHOLM MANAGEMENT LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128799**

Date of Receipt

**06 / 23 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WAYNE LINDHOLM**

Mailing Address 25 VISTA MONTEMAR

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LINDHOLM MANAGEMENT LLC

Occupation  
PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.128800**

Date of Receipt

**06 / 23 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 986 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL LINEHAN**

Mailing Address 221 ARBOR LN

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ORTHOPEDIC AND SPORTS MEDICINE

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124339**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL LINEHAN**

Mailing Address 221 ARBOR LN

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ORTHOPEDIC AND SPORTS MEDICINE

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124339.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL LINEHAN**

Mailing Address 221 ARBOR LN

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ORTHOPEDIC AND SPORTS MEDICINE

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124339.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 987 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KIM LINEHAN**

Mailing Address 1515 FOX RIDGE COURT

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124341**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

IN-KIND: CATERING SERVICES

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID LIONETT**

Mailing Address 11157 SIERRA PALM CT

City	State	Zip Code
FORT MYERS	FL	33966

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
FINANCIAL REP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124344**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RONALD LIPSEY**

Mailing Address PO BOX 7795

City	State	Zip Code
AVON	CO	81620

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124346**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 988 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUZANNE LIPSEY**

Mailing Address PO BOX 7795

City	State	Zip Code
AVON	CO	81620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124348**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUZANNE LIPSEY**

Mailing Address PO BOX 7795

City	State	Zip Code
AVON	CO	81620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124349**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUZANNE LIPSEY**

Mailing Address PO BOX 7795

City	State	Zip Code
AVON	CO	81620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124350**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 989 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**M J LISLE**

Mailing Address **6639 N LONGMEADOW**

City	State	Zip Code
LINCOLNWOOD	IL	60712

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124352**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NOEL S LISTON**

Mailing Address **211 S STONE AVENUE**

City	State	Zip Code
LA GRANGE	IL	60525

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DARWIN REALTY**

Occupation  
**BROKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124354**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALEKSEY LISTOVNICH**

Mailing Address **15179 BEVERLY DRIVE, AP**

City	State	Zip Code
PHILADELPHIA	PA	19116

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DAY & ZIMMERMANN**

Occupation  
**PROGRAMMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124356**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 990 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JON LITSCHER**

Mailing Address 300 STARKWEATHER DR

City	State	Zip Code
BEAVER DAM	WI	53916

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124358**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE S LITTELL**

Mailing Address 5300 MEMORIAL DR

City	State	Zip Code
HOUSTON	TX	77007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GROPPE, LONG & LITTELL

Occupation  
PETROLEUM CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124359**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

2650.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED LITTLE**

Mailing Address 426 BROADWAY ST

City	State	Zip Code
CLOQUET	MN	55720-1749

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124360**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 991 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED LITTLE**

Mailing Address **426 BROADWAY ST**

City <b>CLOQUET</b>	State <b>MN</b>	Zip Code <b>55720-1749</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.124361**

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TRACY LITTLE**

Mailing Address **3728 PARK RIDGE LN**

City <b>LEXINGTON</b>	State <b>KY</b>	Zip Code <b>40509</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124363**

Date of Receipt

M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AIMEE LOCKE**

Mailing Address **601 CONTOUR DRIVE**

City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78212</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124365**

Date of Receipt

M M / D D / Y Y Y Y
07 / 01 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3100.00**

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 992 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****AIMEE LOCKE**

Mailing Address 601 CONTOUR DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124366**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****AIMEE LOCKE**

Mailing Address 601 CONTOUR DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124367**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****JOHN R LOCKE**

Mailing Address 100 W HOUSTON STREET, S

City	State	Zip Code
SAN ANTONIO	TX	78205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124369**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 993 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN R LOCKE**

Mailing Address 100 W HOUSTON STREET, S

City	State	Zip Code
SAN ANTONIO	TX	78205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.124370**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NINA LOCKE**

Mailing Address 1808 SUMMERFIELD ROAD

City	State	Zip Code
WINTER PARK	FL	32792

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124372**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM LOCKE**

Mailing Address 601 CONTOUR DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PIONEER ENERGY SERVICES

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124374**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 994 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM LOCKE**

Mailing Address 601 CONTOUR DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PIONEER ENERGY SERVICES**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124375**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM LOCKE**

Mailing Address 601 CONTOUR DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PIONEER ENERGY SERVICES**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124376**

Date of Receipt

**07 / 01 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN L LOEB**

Mailing Address 194 ANDERSON HILL ROAD

City	State	Zip Code
PURCHASE	NY	10577

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN L. LOEB JR. ASSOCIATES INC**

Occupation  
**FINANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124378**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 995 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHERYL LOEHR**

Mailing Address 708 WELL ST

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ST. PAULS LUTHERAN SCHOOL

Occupation  
SERVER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.124380**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT LOGAN**

Mailing Address 100 BEACHVIEW DR

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124382**

Date of Receipt

**07** / **27** / **2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE LONDON**

Mailing Address 49630 CANYON VIEW DRIVE

City	State	Zip Code
PALM DESERT	CA	92260

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124384**

Date of Receipt

**06** / **22** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 996 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY LONG**

Mailing Address PO BOX 398

City	State	Zip Code
INKOM	ID	83245

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LONG CONSULTING LLC

Occupation  
MARKETING CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124386**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD W LONG**

Mailing Address 8312 BEAVER LAKE DR

City	State	Zip Code
SAN DIEGO	CA	92119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DIVING UNLIMITED INTN'L

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124388**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RYAN LONG**

Mailing Address 16 S LEXINGTON STREET

City	State	Zip Code
ARLINGTON	VA	22204

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BCR GROUP

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124390**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 997 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BERNADET LONGDEN**

Mailing Address 5211 ALEXANDER DR

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124392**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARL LONGNECKER**

Mailing Address 9536 CAVENDISH DR

City	State	Zip Code
TAMPA	FL	33626

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124394**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL LOPEZ**

Mailing Address 910 CLEVELAND RD

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124396**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL LOPEZ**

Mailing Address 910 CLEVELAND RD

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124397**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA LOPEZ-ALVA**

Mailing Address 650 SUNRISE DR E

City	State	Zip Code
VISTA	CA	92084

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PRIME INVESTOR

Occupation  
BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.124399**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONNA J LORGE**

Mailing Address 306 N SEGOE RD

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124401**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 999 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONNA J LORGE**

Mailing Address 306 N SEGOE RD

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.124402**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLEO LOSINSKI**

Mailing Address S2972 WAUMANDEE CREEK ROAD

City	State	Zip Code
FOUNTAIN CITY	WI	54929

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124404**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES LOUGHLIN**

Mailing Address 273 LONG COVE DR

City	State	Zip Code
HILTON HEAD I	SC	29928

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124406**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1000 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD LOUIS**

Mailing Address **645 N WREN AVE**

City	State	Zip Code
PALATINE	IL	60067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124407**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J J LOUIS**

Mailing Address **227 W MONROE ST**

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PARSON CAPITAL CORP.**

Occupation  
**CO-FOUNDER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.124409**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROLINE LOWDEN**

Mailing Address **1725 W POINT CIRCLE**

City	State	Zip Code
MARIETTA	GA	30068

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124411**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1001 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES LOWENSTEIN**

Mailing Address 1006 VILLA DRIVE

City	State	Zip Code
MELBOURNE	FL	32940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**L&N ENTERPRISES GROUP, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

217.56

**Transaction ID : SA17A.124412**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES LOWENSTEIN**

Mailing Address 1006 VILLA DRIVE

City	State	Zip Code
MELBOURNE	FL	32940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**L&N ENTERPRISES GROUP, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.56

**Transaction ID : SA17A.124413**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES LOWENSTEIN**

Mailing Address 1006 VILLA DRIVE

City	State	Zip Code
MELBOURNE	FL	32940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**L&N ENTERPRISES GROUP, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

239.56

**Transaction ID : SA17A.124414**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

12.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

97.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1002 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID LOWRY**

Mailing Address 1440 W. GREENBRIAR DRIVE

City	State	Zip Code
MOUNT PROSPECT	IL	60056

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UOP

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.124416**

Date of Receipt

**07 / 26 / 2015**

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RANDALL LOWRY**

Mailing Address 15914 RATHLIN CT

City	State	Zip Code
SPRING	TX	77379

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UNION GAS CORP

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124418**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHELDON B LUBAR**

Mailing Address 8160 N GREEN BAY RD STE

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LUBAR & CO. INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124420**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3220.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1003 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY LUCHT**

Mailing Address 20 CHURCH ST

City State Zip Code  
GREENWICH CT 06830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124421**

Date of Receipt

M M / D D / Y Y Y Y  
09 17 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS J LUCKE**

Mailing Address 801 MEADOW LN

City State Zip Code  
WISCONSIN DELLS WI 53965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WILDERNESS RESORT

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124423**

Date of Receipt

M M / D D / Y Y Y Y  
08 24 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARIA V LUDDY**

Mailing Address 4641 PARAGON PARK RD

City State Zip Code  
RALEIGH NC 27616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124425**

Date of Receipt

M M / D D / Y Y Y Y  
06 22 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5450.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT L LUDDY**

Mailing Address 4641 PARAGON PARK RD

City	State	Zip Code
RALEIGH	NC	27616

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CAPTIVE-AIRE SYSTEMS INC

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124427**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLEN LUDWIG**

Mailing Address 109 E 3RD ST

City	State	Zip Code
SAN BERNARDIN	CA	92410

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CIVIL ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124429**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES LUELLEN**

Mailing Address 7103 WEST RIM DR.

City	State	Zip Code
AUSTIN	TX	78731

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124431**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1005 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JASON LUJAN**

Mailing Address 4630 E TALMADGE DR

City	State	Zip Code
SAN DIEGO	CA	92116

FEC ID number of contributing federal political committee.

C

Name of Employer  
ANESTHESIA SERVICE MEDICAL GROUP

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124433**

Date of Receipt

MM / DD / YYYY  
06 / 27 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JASON LUJAN**

Mailing Address 4630 E TALMADGE DR

City	State	Zip Code
SAN DIEGO	CA	92116

FEC ID number of contributing federal political committee.

C

Name of Employer  
ANESTHESIA SERVICE MEDICAL GROUP

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124434**

Date of Receipt

MM / DD / YYYY  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JASON LUJAN**

Mailing Address 4630 E TALMADGE DR

City	State	Zip Code
SAN DIEGO	CA	92116

FEC ID number of contributing federal political committee.

C

Name of Employer  
ANESTHESIA SERVICE MEDICAL GROUP

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.124435**

Date of Receipt

MM / DD / YYYY  
08 / 04 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1006 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. C LUNDQUIST**

Mailing Address 5330 AYERS ST

City	State	Zip Code
CORPUS CHRISTI	TX	78415

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124437**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JONATHAN LUPO**

Mailing Address 1 BUTTERNUT HOLLOW ROAD

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124439**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VITO LUPPINO**

Mailing Address 140 PROSPECT AVE

City	State	Zip Code
HACKENSACK	NJ	07601

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124441**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1007 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID LUPTON**

Mailing Address **N2346 FOREST RUN**

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124443**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VIC LUTZ**

Mailing Address **843 E. SOUTH STREET**

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MCMAHON**

Occupation  
**CFO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124445**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LETTY LUTZKER**

Mailing Address **408 S 2ND ST**

City	State	Zip Code
BANGOR	PA	18013

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**IMAGERY CONSULTANT OF ESSEX**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124447**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1008 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS LUTZOW**

Mailing Address 4444 N 110TH ST

City	State	Zip Code
WAUWATOSA	WI	53225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
ICARE (INDEPENDENT CARE HEALTH PLAN)	ICARE (INDEPENDENT CARE HEALTH PLAN)

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124449**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DON LYLE**

Mailing Address 1287 SILVERADO STREET

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124451**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID LYNCH**

Mailing Address 2300 BROWNS LAKE DR

City	State	Zip Code
BURLINGTON	WI	53105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
LYNCH CHEVROLET	OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124453**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1009 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM D LYNCH**

Mailing Address **PO BOX 2207**

City	State	Zip Code
<b>RANCHO SANTA</b>	<b>CA</b>	<b>92067</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE WILLIAM D LYNCH COMPANY**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.124455**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>30</b>		<b>2015</b>

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT MACAULAY**

Mailing Address **1191 2ND AVE**

City	State	Zip Code
<b>SEATTLE</b>	<b>WA</b>	<b>98101</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124457**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>04</b>		<b>2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES J MACCO**

Mailing Address **925 DEERWOOD CT**

City	State	Zip Code
<b>ONEIDA</b>	<b>WI</b>	<b>54155</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124459**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>22</b>		<b>2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1010 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES J MACCO**

Mailing Address 925 DEERWOOD CT

City	State	Zip Code
ONEIDA	WI	54155

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124460**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT MACDONALD**

Mailing Address 211 RUE DU MAURIER

City	State	Zip Code
LAFAYETTE	LA	70503

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124462**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARAMER MACE**

Mailing Address 260 E MARAPAI RD

City	State	Zip Code
PRESCOTT	AZ	86303

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124463**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1011 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DREW MACEWEN**

Mailing Address **PO BOX 651**

City <b>UNION</b>	State <b>WA</b>	Zip Code <b>98592</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WA HOUSE OF REPRESENTATIVES**

Occupation  
**STATE REPRESENTATIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124465**

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LANNING MACFARLAND**

Mailing Address **2500 INDIGO LN UNIT 108**

City <b>GLENVIEW</b>	State <b>IL</b>	Zip Code <b>60026</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124467**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STU MACGIBBON**

Mailing Address **13533 GLASGOW LANE**

City <b>APPLE VALLEY</b>	State <b>MN</b>	Zip Code <b>55124</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124469**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1012 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS J MACGINNITI**

Mailing Address 505 BROOKFIELD DR

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STATE OF GEORGIA

Occupation  
REVENUE COMMISNIONER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124471**

Date of Receipt

**07** / **17** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUGLAS J MACGINNITI**

Mailing Address 505 BROOKFIELD DR

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STATE OF GEORGIA

Occupation  
REVENUE COMMISNIONER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124472**

Date of Receipt

**07** / **17** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHELLE T MACGINNITI**

Mailing Address 505 BROOKFIELD DR

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124474**

Date of Receipt

**07** / **17** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1013 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN J MACK**

Mailing Address **N1807 SIDNEY SMITH L**

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PROPERTY MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124476**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRET MACKAY**

Mailing Address **4542 LOMA VISTA DRIVE**

City	State	Zip Code
LA CANADA	CA	91011

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DLM DEVELOPMENT**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124478**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT J MACKAY**

Mailing Address **530 MALCOLM RD NW**

City	State	Zip Code
VIENNA	VA	22180

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NERA ECONOMIC**

Occupation  
**ECONOMIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.124480**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1014 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HAROLD E MACKENTHUN**

Mailing Address 3021 OVERLOOK DRIVE

City	State	Zip Code
VALLEJO	CA	94591

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124482**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAY MACKMAN**

Mailing Address 11415 N JUSTIN DR

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
DENTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124484**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARRY MACLEAN**

Mailing Address 1000 ALLANSON RD

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MACLEAN-FOGG

Occupation  
OWNER & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124486**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1015 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARRY MACLEAN**

Mailing Address 1000 ALLANSON RD

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MACLEAN-FOGG**

Occupation  
**OWNER & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124487**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY ANN MACLEAN**

Mailing Address 1000 ALLANSON RD

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124489**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS MACLEOD**

Mailing Address 12800 VONN RD, APT 9802

City	State	Zip Code
LARGO	FL	33774

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124491**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1016 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****DAVID MACON**

Mailing Address 4686 AMBERWOOD TRAIL

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124493**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			19			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****JOHN P MACY**

Mailing Address 4839 HEWITTS POINT R

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARENZ, MOLTER, MACY AND RIFFLE, SCOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124495**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****ROBERT MADDOX**

Mailing Address 13731 HICKMAN ROAD, UNIT 3407

City	State	Zip Code
URBAN DALE	IA	50323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124497**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1017 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES MADIGAN**

Mailing Address 3913 ALGOMA RD

City	State	Zip Code
GREEN BAY	WI	54311

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124499**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BETTY MADSEN**

Mailing Address 3037 TIANA DR

City	State	Zip Code
SANTA YNEZ	CA	93460

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124501**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			19			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE MAGEL**

Mailing Address 7868 YORKTOWN BLVD

City	State	Zip Code
CORPUS CHRIST	TX	78414

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
MEDICAL DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124503**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

800.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1018 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**W. BRYAN MAGERS**

Mailing Address 2342 E. FRITTS LANE

City	State	Zip Code
SPRINGFIELD	MO	65804

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124505**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN MAGGART**

Mailing Address 1006 JONES PKWY

City	State	Zip Code
BRENTWOOD	TN	37027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MAGGART & ASSOCIATES, P.C.

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124507**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTY MAGGIO**

Mailing Address 2226 WEMBLY

City	State	Zip Code
ROCKFORD IL	IL	61109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124509**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1019 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDA MAGGLOS**

Mailing Address 5601 SEA VIEW DR

City	State	Zip Code
MALIBU	CA	90265

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124511**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA MAGGLOS**

Mailing Address 5601 SEA VIEW DR

City	State	Zip Code
MALIBU	CA	90265

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124512**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDA MAGGLOS**

Mailing Address 5601 SEA VIEW DR

City	State	Zip Code
MALIBU	CA	90265

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124513**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 05 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1020 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC****A.** Full Name (Last, First, Middle Initial)  
**LINDA MAGGLOS**

Mailing Address 5601 SEA VIEW DR

City	State	Zip Code
MALIBU	CA	90265

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

635.00

**Transaction ID : SA17A.124514**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**LINDA MAGGLOS**

Mailing Address 5601 SEA VIEW DR

City	State	Zip Code
MALIBU	CA	90265

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

685.00

**Transaction ID : SA17A.124515**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**CHRISTOP J MAGIERA**

Mailing Address 1506 PINE VIEW LN

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KOSCIUSKO MEDICAL GROUPOccupation  
PHYSICIAN

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124517**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item**Subtotal Of Receipts This Page** (optional).....

585.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1021 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAMELA G MAGIERA**

Mailing Address **3496 S STATE ROAD 15**

City	State	Zip Code
WARSAW	IN	46580

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124519**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVE MAGNUM**

Mailing Address **N6837 BOBBIE ROAD**

City	State	Zip Code
PARDEEVILLE	WI	53954

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MAGNUM COMMUNICATIONS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124521**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK & DIANE MAGUIRE**

Mailing Address **3060 E. NEWPORT CT.**

City	State	Zip Code
MILWAUKEE	WI	53211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FIRST CAPITAL SURETY & TRUST CO.**

Occupation  
**SELF-EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124523**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1022 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN MAGUIRE**

Mailing Address 359 W THORNAPPLE LN

City	State	Zip Code
GRAFTON	WI	53024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124525**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FLOYD MAHANAY**

Mailing Address 4306 MASTERS DRIVE

City	State	Zip Code
LEAGUE CITY	TX	77573

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PJS OF HOUSTON INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124527**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JAMES MAHER**

Mailing Address 615 POND LICK ROAD

City	State	Zip Code
MOREHEAD	NY	40351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124529**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5800.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1023 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY MAHER**

Mailing Address **615 POND LICK ROAD**

City **MOREHEAD** State **NY** Zip Code **40351**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124531**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIA MAHONEY**

Mailing Address **2027 MINOR ROAD**

City **CHARLOTTESVIL** State **VA** Zip Code **22903**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**UNIVERSITY OF VIRGINIA**

Occupation  
**PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124533**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**P. M MAHONEY**

Mailing Address **9731 N HILLTOP LANE**

City **MEQUON** State **WI** Zip Code **53092**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PARK BANK**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124535**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1024 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL G MAHONEY**

Mailing Address 2027 MINOR ROAD

City	State	Zip Code
CHARLOTTESVILLE	VA	22903

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UNIVERSITY OF VIRGINIA

Occupation  
PROFESSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124537**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LORN MAHONEY JR**

Mailing Address 7553 KINGS CREEK DRIVE

City	State	Zip Code
LODI	OH	44254

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INNOVATIONS HOLDING COMPANY, LLC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124539**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TODD MAHR**

Mailing Address 1620 KELLER COURT

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124541**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1025 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD MAIER**

Mailing Address 58 HORSE FENCE HILL ROAD

City	State	Zip Code
SOUTHBURY	CT	06488

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
VET

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124543**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HEIDI J MAINS**

Mailing Address 10435 N RIVERLAKE DR

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124545**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEITH MAISCH**

Mailing Address PO BOX 9258

City	State	Zip Code
GREEN BAY	WI	54308

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
TRUCK DRIVER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124547**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1026 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ADAM MAKOWSKI**

Mailing Address 106 SWEET BRIAR DRIVE

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MT. OLYMPUS RESORTS

Occupation  
GM

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124549**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMY MALATESTA**

Mailing Address 385 CONCORD DRIVE

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.128832**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

REATTRIBUTED

Amount of Each Receipt this Period

1350.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL MALATESTA**

Mailing Address 385 CONCORD DRIVE

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ADVANCED WASTE SERVICES INC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124551**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1027 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL MALATESTA**

Mailing Address **385 CONCORD DRIVE**

City	State	Zip Code
<b>BROOKFIELD</b>	<b>WI</b>	<b>53005</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ADVANCED WASTE SERVICES INC**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1350.00**

**Transaction ID : SA17A.128830**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>08</b>		<b>2015</b>

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-1350.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS MALIN**

Mailing Address **5 MALLARD LN**

City	State	Zip Code
<b>CAMP HILL</b>	<b>PA</b>	<b>17011</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GTW ASSOCIATES**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124553**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>23</b>		<b>2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NICK MALLINGER**

Mailing Address **1815 GLACIER RIDGE ROAD**

City	State	Zip Code
<b>WAUKESHA</b>	<b>WI</b>	<b>53188</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124555**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>15</b>		<b>2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1028 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH MALO**

Mailing Address 1020 W NORTHWEST HIGHWAY

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SWISS AUTOMATION**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124557**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**L PAUL MALONEY**

Mailing Address 1136 RIVERVIEW DR

City	State	Zip Code
SHEBOYGAN	WI	53083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124559**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**L PAUL MALONEY**

Mailing Address 1136 RIVERVIEW DR

City	State	Zip Code
SHEBOYGAN	WI	53083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124560**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1029 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TIMOTHY MANATT**

Mailing Address 1717 WHISPERING PINES CIR

City	State	Zip Code
CEDAR FALLS	IA	50613

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124562**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUG MANCHESTER**

Mailing Address 350 CAMINO DE LA REI

City	State	Zip Code
SAN DIEGO	CA	92108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124564**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUG MANCHESTER**

Mailing Address 350 CAMINO DE LA REI

City	State	Zip Code
SAN DIEGO	CA	92108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.124565**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-1350.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1030 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GENIYA MANCHESTER**

Mailing Address 350 CAMINO DE LA REI

City	State	Zip Code
SAN DIEGO	CA	92108

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

**Transaction ID : SA17A.124567**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

1350.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN MANDEVILLE**

Mailing Address 3210 BLANDEMAR DRIVE

City	State	Zip Code
CHARLOTTESVIL	VA	22903

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124569**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOP MANLEY**

Mailing Address 9600 WEATHERVANE DR

City	State	Zip Code
CHAGRIN FALLS	OH	44023

FEC ID number of contributing federal political committee.

C

Name of Employer  
GRAPHCO

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124571**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1031 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM MANN**

Mailing Address **W265 N2227 SAWGRASS LN**

City	State	Zip Code
PEWAUKEE	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LASER TAG ADVENTURE, INC.**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124573**

Date of Receipt

**07 / 07 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LANCE A MANNING**

Mailing Address **4485 CADD O LANE**

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EARS NOSE & THROAT CENTER**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124577**

Date of Receipt

**09 / 14 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LANCE A MANNING**

Mailing Address **4485 CADD O LANE**

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EARS NOSE & THROAT CENTER**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124577.0**

Date of Receipt

**09 / 14 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1032 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**LANCE A MANNING**

Mailing Address **4485 CADD O LANE**

City State Zip Code  
**FAYETTEVILLE AR 72704**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EARS NOSE & THROAT CENTER**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124577.1**

Date of Receipt

**09 / 14 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RJ MANNING**

Mailing Address **1831 PORT KIMBERLY PLACE**

City State Zip Code  
**NEWPORT BEACH CA 92660**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124580**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN MANNION**

Mailing Address **741 SIGNAL LIGHT RD**

City State Zip Code  
**MOORESTOWN NJ 08057**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**275.00**

**Transaction ID : SA17A.124582**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1033 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CYNTHIA MANOS**

Mailing Address **535 EAST 6TH STREET**

City <b>HINSDALE</b>	State <b>IL</b>	Zip Code <b>60521</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124584**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 02 / 2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS MARA**

Mailing Address **9 BRIDGEWATERS DR**  
**3**

City <b>OCEANPORT</b>	State <b>NJ</b>	Zip Code <b>07757</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124586**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 21 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VIRGINIA MARAK**

Mailing Address **118 SUNRISE ST**

City <b>HOT SPRINGS N</b>	State <b>AR</b>	Zip Code <b>71913</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124588**

Date of Receipt

M M / D D / Y Y Y Y
<b>08 / 03 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1034 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONNA C MARAS-GARD**

Mailing Address **W1186 TRIESTE DRIVE**

City <b>LAKE GENEVA</b>	State <b>WI</b>	Zip Code <b>53147</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124590**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HERBERT MARBACH**

Mailing Address **12 WHITECLIFF**

City <b>LAGUNA NIGUEL</b>	State <b>CA</b>	Zip Code <b>92677</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124591**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES MARCHESSAULT**

Mailing Address **4811 ISLAND POND COURT #1201**

City <b>BONITA SPRINGS</b>	State <b>FL</b>	Zip Code <b>34134</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124593**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**600.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1035 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER MARCUM**

Mailing Address 107 DERBY GLEN LN

City	State	Zip Code
BRENTWOOD	TN	37027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DEV DIGITAL LLC

Occupation  
FOUNDING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124595**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BERNARD MARCUS**

Mailing Address 1266 W PACES FERRY R  
#

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124597**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERNARD MARCUS**

Mailing Address 1266 W PACES FERRY R  
#

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124598**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1036 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILMA MARCUS**

Mailing Address 1266 W PACES FERRY R  
#

City State Zip Code  
ATLANTA GA 30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124600**

Date of Receipt

M M / D D / Y Y Y Y  
07 10 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THERESA MAREK**

Mailing Address 14390 W NETTESHEIM LANE

City State Zip Code  
NEW BERLIN WI 53151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124602**

Date of Receipt

M M / D D / Y Y Y Y  
08 17 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH MARIANI**

Mailing Address 1400 MCKINNEY ST  
H

City State Zip Code  
HOUSTON TX 77010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENERVEST LTD

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124604**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1037 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH MARIANI**

Mailing Address 1400 MCKINNEY ST  
H

City State Zip Code  
HOUSTON TX 77010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENERVEST LTD

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124605**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SANDRA MARIANI**

Mailing Address 1400 MCKINNEY ST

City State Zip Code  
HOUSTON TX 77010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KS MARIANI GROUP LLC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124607**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MARK**

Mailing Address W5627 COUNTY ROAD Y

City State Zip Code  
PRINCETON WI 54968

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124609**

Date of Receipt

M M / D D / Y Y Y Y  
08 12 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1038 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN MARKLEY**

Mailing Address 3780 EAGLE VIEW CT

City	State	Zip Code
COLUMBIA	MO	65203

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
VA

Occupation  
M.D.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124611**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL MARKOS**

Mailing Address PO BOX 5507

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124613**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL MARKOS**

Mailing Address PO BOX 5507

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128791**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1039 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS MARKOS**

Mailing Address PO BOX 5507

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128793**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD MARKUSON**

Mailing Address 419 NASCA WAY

City	State	Zip Code
SACRAMENTO	CA	95831-3739

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PACIFIC ADVOCACY GROUP

Occupation  
LOBBYIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124615**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD MARKUSON**

Mailing Address 419 NASCA WAY

City	State	Zip Code
SACRAMENTO	CA	95831-3739

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PACIFIC ADVOCACY GROUP

Occupation  
LOBBYIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.124616**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			16			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1040 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ED MARONICK**

Mailing Address **PO BOX 3054**

City State Zip Code  
**ALPINE WY 83128**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124618**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PETER N. MARRON**

Mailing Address **17 HIGH POINT ROAD**

City State Zip Code  
**WESTPORT CT 06880**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PINNACLE ASSOCIATES,LTD.**

Occupation  
**INVESTMENT MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124620**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MARSHALL**

Mailing Address **8294 AMMONS CIR**

City State Zip Code  
**ARVADA CO 80005**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILLERCOORS, LLC**

Occupation  
**MILLERCOORS, LLC**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124622**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3450.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1041 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DWIGHT MARSO**

Mailing Address 10975 HIGHWAY KK

City	State	Zip Code
CROCKER	MO	65452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AECOM

Occupation  
TECHNICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124623**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DWIGHT MARSO**

Mailing Address 10975 HIGHWAY KK

City	State	Zip Code
CROCKER	MO	65452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AECOM

Occupation  
TECHNICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124624**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEBRA C MARTEN**

Mailing Address 3147 COUNTY ROAD K N

City	State	Zip Code
CUSTER	WI	54423

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124626**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1042 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DON MARTENS**

Mailing Address 1921 PARK SKYLINE RD.

City	State	Zip Code
SANTA ANA	CA	92705

FEC ID number of contributing federal political committee.

C

Name of Employer  
KNOBBE MARTENS

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124628**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DON MARTENS**

Mailing Address 1921 PARK SKYLINE RD.

City	State	Zip Code
SANTA ANA	CA	92705

FEC ID number of contributing federal political committee.

C

Name of Employer  
KNOBBE MARTENS

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124629**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD S MARTIN**

Mailing Address 1046 WOODBERRY RD

City	State	Zip Code
NEW KENSINGTO	PA	15068

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124633**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1043 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY MARTIN**

Mailing Address 8605 AMESTOY AVENUE

City	State	Zip Code
SHERWOOD FORE	CA	91325

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124635**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY MARTIN**

Mailing Address 8605 AMESTOY AVENUE

City	State	Zip Code
SHERWOOD FORE	CA	91325

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124636**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY MARTIN**

Mailing Address PO BOX 91588

City	State	Zip Code
ARLINGTON	TX	76015

FEC ID number of contributing federal political committee.

C

Name of Employer  
MARTIN SPROCKET & GEAR INC.

Occupation  
VICE CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124638**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1044 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**GARY MARTIN**

Mailing Address **M325 FIR 57**

City State Zip Code  
**MARSHFIELD WI 54448**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124640**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JILL MARTIN**

Mailing Address **W209N16521 CAIRN CT**

City State Zip Code  
**JACKSON WI 53037**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RJ WOOD INDUSTRIES, INC.**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124642**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MARTIN**

Mailing Address **722 ENFORD CT.**

City State Zip Code  
**KATY TX 77450**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124644**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1800.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1045 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KIRK NICHOLAS MARTIN**

Mailing Address 4659 RAVINE DRIVE

City	State	Zip Code
BLOOMFIELD HILLS	MI	48301

FEC ID number of contributing federal political committee.

C

Name of Employer  
MARTIN LAND & INVESTMENT

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124646**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LYDIA MARTIN**

Mailing Address

City	State	Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124631**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MEREDITH MARTIN**

Mailing Address 542 BROOKS WOOLSEY R

City	State	Zip Code
FAYETTEVILLE	GA	30215

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124648**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1046 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL MARTIN**

Mailing Address 3878 PINE VIEW DR.

City	State	Zip Code
PULASKI	WI	54162

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124650**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL MARTIN**

Mailing Address 912 LAUREL LN

City	State	Zip Code
MONTROSE	CO	81401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124652**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**OLIVER MARTIN**

Mailing Address 11069 COUNTY ROAD B

City	State	Zip Code
MARSHFIELD	WI	54449

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSTRUCTION**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124654**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1047 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TOM MARTIN**

Mailing Address 119 NORTHGATE DR.

City	State	Zip Code
SPRING	TX	77380

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124656**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOMMY MARTIN**

Mailing Address 2808 GOLFVIEW DR

City	State	Zip Code
MCKINNEY	TX	75069-8028

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PAC

Occupation  
SALES REP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124658**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM MARTIN**

Mailing Address 6520 GRANADA LANE

City	State	Zip Code
EAGLE	ID	83616

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WFM ENT LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124660**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1048 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM MARTIN**

Mailing Address 6520 GRANADA LANE

City	State	Zip Code
EAGLE	ID	83616

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WFM ENT LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.124661**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETE MARTINELLI**

Mailing Address 2781 HARBINS RD SE

City	State	Zip Code
BETHLEHEM	GA	30620

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N&N MOVING SUPPLIES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124663**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN MARTING**

Mailing Address 4610 STACKSTONE

City	State	Zip Code
KATY	TX	77450

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124665**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1049 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE MARTINOVICH**

Mailing Address 5048 GROVELAND TER

City	State	Zip Code
NAPLES	FL	34119-8429

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124667**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANDREW MARTZLOFF**

Mailing Address 241 WINTERGREEN LN.

City	State	Zip Code
BOZEMAN	MT	59715

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BCA LLC

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124669**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEBBIE MARUSH**

Mailing Address 1570 BAY BLVD

City	State	Zip Code
ATLANTIC BEACH	NY	11509

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124671**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1050 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDA MARUSKA**

Mailing Address 532 FRANKLIN AVENUE

City	State	Zip Code
BERTHOUD	CO	80513

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124673**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 05 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MR. RICHARD C MARX**

Mailing Address PO BOX 440

City	State	Zip Code
WAPPINGERS FALLS	NY	12590

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124675**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM MARX**

Mailing Address 1509 SOUTHWICK RD

City	State	Zip Code
VIRGINIA BEAC	VA	23451

FEC ID number of contributing federal political committee.

C

Name of Employer  
NEXCOM

Occupation  
BUYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124676**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 25 / 2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

625.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1051 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES MASHOCK**

Mailing Address 311 N 5TH ST APT 2

City	State	Zip Code
WATERFORD	WI	53185

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124678**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK MASLOWSKI**

Mailing Address 2405 SCHOOL STREET

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.124680**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

375.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM MASON**

Mailing Address PO BOX 43

City	State	Zip Code
ABERDEEN	WA	98520

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124682**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3325.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1052 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JIM MASON**

Mailing Address **PO BOX 43**

City <b>ABERDEEN</b>	State <b>WA</b>	Zip Code <b>98520</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124683**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JIM MASON**

Mailing Address **PO BOX 43**

City <b>ABERDEEN</b>	State <b>WA</b>	Zip Code <b>98520</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124684**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

**CHARGEBACK**

Amount of Each Receipt this Period

**-2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BETTE MASSARO**

Mailing Address **34709 BARTLETT RD**

City <b>OCONOMOWOC</b>	State <b>WI</b>	Zip Code <b>53066</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ENTREPRENEUR**

Occupation  
**ENTREPRENEUR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124686**

Date of Receipt

M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2700.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1053 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BERNARD MASTERS**

Mailing Address **6 MISTY LANE**

City	State	Zip Code
GREENVILLE	SC	29615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GREENVILLE HOSPITAL SYSTEM**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.124688**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

**750.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CONRAD MASTERSON**

Mailing Address **3601 TURTLE CREEK BLVD., #1103**

City	State	Zip Code
DALLAS	TX	75219

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124689**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUKUMAR MATHAN**

Mailing Address **303 HAMILTON SHORE DR**

City	State	Zip Code
WINTER HAVEN	FL	33881

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124690**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1054 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUKUMAR MATHAN**

Mailing Address 303 HAMILTON SHORE DR

City	State	Zip Code
WINTER HAVEN	FL	33881

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124691**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY MATHEIS**

Mailing Address 3 TEAL

City	State	Zip Code
IRVINE	CA	92604

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LAW OFFICE MA MATHEIS

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124693**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL R MATHEWSON**

Mailing Address 3209 MAIN ST

City	State	Zip Code
STRATFORD	CT	06614

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STRATFORD

Occupation  
CLERK

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124695**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1055 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JIMMY MATLOCK**

Mailing Address 190 MATLOCK ROAD

City	State	Zip Code
LENOIR CITY	TN	37771

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124697**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN MATTER**

Mailing Address 19430 TARA DRIVE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
THE EQUITABLE BANK

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124699**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES W MATTHEWS**

Mailing Address 3863 ISLA DEL SOL WA

City	State	Zip Code
NAPLES	FL	34114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
USSI

Occupation  
BUS. EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124701**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1056 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS (TOM) MATTHEWS**

Mailing Address **PO BOX 275**

**208 LOWER REDWATER CREEK RD**

City <b>BEULAH</b>	State <b>WY</b>	Zip Code <b>82712</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124703**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 13 / 2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM MATTISON**

Mailing Address **102 POSTELLE DRIVE**

City <b>ANDERSON</b>	State <b>SC</b>	Zip Code <b>29621</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124705**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 25 / 2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM MATTISON**

Mailing Address **102 POSTELLE DRIVE**

City <b>ANDERSON</b>	State <b>SC</b>	Zip Code <b>29621</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.124706**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 25 / 2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2500.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1057 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM MATTISON**

Mailing Address 102 POSTELLE DRIVE

City	State	Zip Code
ANDERSON	SC	29621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124707**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		25		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARRY L MATZ**

Mailing Address P.O. BOX 386

City	State	Zip Code
ELKHART LAKE	WI	53020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PLYCO CORP

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124709**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LISA A MAUER**

Mailing Address 9216 RIDGE BOULEVARD

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RICKERT INDUSTRIES

Occupation  
CHAIRMAN

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.124711**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

**REFUNDED ON 11/30/2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1058 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY ANN MAUER**

Mailing Address 8969 NW 187TH LN

City	State	Zip Code
REDDICK	FL	32686

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124713**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBIN MAUPIN**

Mailing Address 310 E. CITRUS AVE.

City	State	Zip Code
REDLANDS	CA	92373

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124715**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARRY MAURER**

Mailing Address 17913 N. FM 400

City	State	Zip Code
IDALOU	TX	79329

FEC ID number of contributing federal political committee.

C

Name of Employer  
TEXAS TECH UNIVERSITY HEALTH  
SCIENCES

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124717**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1059 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOAN MAXWELL**

Mailing Address 700 HAMPTON RD

City	State	Zip Code
BURBANK	CA	91504

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124719**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES MAY**

Mailing Address 7728 SILVER MOON WAY

City	State	Zip Code
INDIANAPOLIS	IN	46259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.124721**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH MAY**

Mailing Address 133 ABBOTTSFORD

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124723**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1060 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN MAYBERRY**

Mailing Address 1290 VALLEY ESTATES ROAD

City	State	Zip Code
MONDOVI	WI	54755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124725**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH MAYBERRY**

Mailing Address PO BOX 160

City	State	Zip Code
FITZGERALD	GA	31750

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
R. R. STREET & CO. INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124726**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH MAYBERRY**

Mailing Address PO BOX 160

City	State	Zip Code
FITZGERALD	GA	31750

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
R. R. STREET & CO. INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

653.00

**Transaction ID : SA17A.124727**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

303.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

803.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1061 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH MAYBERRY**

Mailing Address PO BOX 160

City	State	Zip Code
FITZGERALD	GA	31750

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
R. R. STREET & CO. INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

903.00

**Transaction ID : SA17A.124728**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTIN E MAYER**

Mailing Address 6519 CROWN COLONY PLACE

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124730**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL P MAYER**

Mailing Address 3746 214TH PL

City	State	Zip Code
MATTESON	IL	60443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124731**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1062 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL P MAYER**

Mailing Address 3746 214TH PL

City	State	Zip Code
MATTESON	IL	60443

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124732**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROY MAYES**

Mailing Address 6881 SE NORTH MARINA WA

City	State	Zip Code
STUART	FL	34996

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124734**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT MAYNOR**

Mailing Address 300 BERRY HOLLOW RD

City	State	Zip Code
GURLEY	AL	35748

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MITCHEL& LEE EYE CENTER

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1063 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY L MCALLISTER**

Mailing Address **PO BOX 758**

City <b>SAINT MICHAEL</b>	State <b>MD</b>	Zip Code <b>21663</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.124738**

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JONATHAN MCALPHINE**

Mailing Address **W348S4971 WATERVILLE**

City <b>DOUSMAN</b>	State <b>WI</b>	Zip Code <b>53118</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROYAL FRANCHISING INC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124740**

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID MCAVOY**

Mailing Address **11 MOUNTVIEW ROAD**

City <b>WELLESLEY</b>	State <b>MA</b>	Zip Code <b>02481</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124742**

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1550.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1064 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HERMAN MCBRIDE**

Mailing Address 14600 ST. RT. 65 P.O.BOX 491

City	State	Zip Code
JACKSON CENTER	OH	45334

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RISING SUN EXPRESS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124744**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES MCBRIDE**

Mailing Address 58 HIGH RIDGE RD.

City	State	Zip Code
NORWAY	ME	04268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124746**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REBA MCCALMON**

Mailing Address 1030 OVERTON LEA RD

City	State	Zip Code
NASHVILLE	TN	37220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124748**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1065 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM MCCAMMAN**

Mailing Address PO BOX 542

City	State	Zip Code
CLACKAMAS	OR	97015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124749**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANET MCCANN**

Mailing Address 947 ARBOLADO RD

City	State	Zip Code
SANTA BARBARA	CA	93103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MCCANN MINI STORAGE

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124751**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS MCCARTAN**

Mailing Address 839 CURTISS #102

City	State	Zip Code
DOWNERS GROVE	IL	60515

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MILLENNIUM TRUST COMPANY

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124753**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1066 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHLEEN MCCARTHY**

Mailing Address 10449 BAINBRIDGE AVENUE

City	State	Zip Code
LOS ANGELES	CA	90024

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124755**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATLEEN J MCCARTHY**

Mailing Address 926 SPANISH MOSS TRL

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124757**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICK MCCARTHY**

Mailing Address 1601 5TH ST NW UNIT A

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DMM MEDIA

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124759**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1067 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MICHEL MCCARTY**

Mailing Address **44 PORCHUCK RD**

City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MM DILLON & CO GROUP**

Occupation  
**INVESTMENT BANKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124761**

Date of Receipt

M M / D D / Y Y Y Y
07 / 23 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TOM MCCASLAND**

Mailing Address **7608 GLENSHANNON CIRCLE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75225</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124763**

Date of Receipt

M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARY MCCASLIN**

Mailing Address **448 HIU STREET**

City <b>MOUNT JOY</b>	State <b>PA</b>	Zip Code <b>17552</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124765**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1750.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1068 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERTA MCCAW**

Mailing Address 1080 PEACHTREE STREET, #1210

City	State	Zip Code
ATLANTA	GA	30309

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIMEDX GROUP**

Occupation  
**VP & GENERAL COUNSEL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124767**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AUDREY Z MCCLELLAN**

Mailing Address 2009 N PARKER DR

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124769**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NORMAN MCCLELLAND**

Mailing Address 2228 NORTH BLACK CANYON

City	State	Zip Code
PHOENIX	AZ	85009

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124771**

Date of Receipt

**09 / 21 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1069 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NORMAN MCCLELLAND**

Mailing Address 2228 NORTH BLACK CANYON

City	State	Zip Code
PHOENIX	AZ	85009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124771.0**

Date of Receipt

**09 / 21 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NORMAN MCCLELLAND**

Mailing Address 2228 NORTH BLACK CANYON

City	State	Zip Code
PHOENIX	AZ	85009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124771.1**

Date of Receipt

**09 / 21 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK MCCLYMONDS**

Mailing Address P.O. BOX 296

City	State	Zip Code
PORTERSVILLE	PA	16051

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MCCLYMOND'S SUPPLY AND TRANSIT

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124773**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1070 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGG MCCOLLUM**

Mailing Address PO BOX 1504

City	State	Zip Code
FRANKLIN	TN	37065

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ARCON GROUP

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124775**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**B. MCCOMBS**

Mailing Address P.O. BOX BH003

City	State	Zip Code
SAN ANTONIO	TX	78201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MCCOMBS ENTERPRISES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124777**

Date of Receipt

**08 / 24 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES F MCCONNELL**

Mailing Address 118 TERRACE DR

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124779**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1071 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN B MCCONNELL**

Mailing Address **4452 AIRPORT BLVD**

City <b>MOBILE</b>	State <b>AL</b>	Zip Code <b>36608</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**AUTHOR AND SPEAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**550.00**

**Transaction ID : SA17A.124780**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ADRIA MCCOOL**

Mailing Address **4500 S DOWNING ST**

City <b>CHERRY HILLS VILLAGE</b>	State <b>CO</b>	Zip Code <b>80113</b>
-------------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**NONE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124782**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES MCCORMICK**

Mailing Address **333 MASSACHUSETTS AVE**  
**UNIT 901**

City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46204</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INDIANA EYE CLINIC**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124784**

Date of Receipt

**08 / 28 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1072 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KRISTINE M MCCORMICK**

Mailing Address 854 RIVERS RUN

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124786**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL A MCCORMICK**

Mailing Address 253 COLLMAN DR

City	State	Zip Code
FAIRVIEW	PA	16415

FEC ID number of contributing federal political committee.

C

Name of Employer  
ERIE BEER CO

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124788**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY MCCORVEY**

Mailing Address 8610 WALLISVILLE ROAD

City	State	Zip Code
HOUSTON	TX	77029

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCCORVEY SHEET METAL

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124790**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1073 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BLANE W MCCOY**

Mailing Address 2604 HIDDEN CANYON DR

City	State	Zip Code
BRECKSVILLE	OH	44141

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SOUTHWEST ORTHOPEDICS

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124792**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED MCCOY**

Mailing Address P.O. BOX 17239

City	State	Zip Code
CHAPEL HILL	NC	27516

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NEUROTRONIC

Occupation  
LEADER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124793**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFF MCCOY**

Mailing Address 810 CAMP AVENUE

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124795**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1074 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN MCCUNE**

Mailing Address 7373 E 29TH ST N  
W

City State Zip Code  
WICHITA KS 67226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124797**

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN MCCUNE**

Mailing Address 7373 E 29TH ST N  
W

City State Zip Code  
WICHITA KS 67226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124798**

Date of Receipt

M M / D D / Y Y Y Y  
08 31 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KELLY MCDANIEL**

Mailing Address 19927 KELLICREEK DRIVE

City State Zip Code  
KATY TX 77450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENERVEST, LTD

Occupation  
OIL & GAS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128888**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1075 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN MCDANIEL**

Mailing Address 19927 KELLICREEK DRIVE

City	State	Zip Code
KATY	TX	77450

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ENERVEST, LTD

Occupation  
OIL & GAS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124800**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN MCDANIEL**

Mailing Address 19927 KELLICREEK DRIVE

City	State	Zip Code
KATY	TX	77450

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ENERVEST, LTD

Occupation  
OIL & GAS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128886**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN MCDANIELS**

Mailing Address 990 OPAL STREET

City	State	Zip Code
MESQUITE	NV	89027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124802**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1076 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTINE MCDERMOTT**

Mailing Address 1522 N PROSPECT AVENUE, #1801

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124804**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL MCDEVITT**

Mailing Address 808 CHELSEA PARK DRIVE

City	State	Zip Code
MARIETTA	GA	30068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ME

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124806**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRUCE MCDONALD**

Mailing Address 16942 BEDFORD LANE

City	State	Zip Code
HUNTINGTON BEACH	CA	92649

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FINANCIAL TOOLS

Occupation  
C.F.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.124808**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	5

Amount of Each Receipt this Period

1250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1077 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID MCDONALD**

Mailing Address 15309 NORTHLAKE ROAD

City	State	Zip Code
MAGALIA	CA	95954

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
NATIONAL EXPERT WITNESS NETWORK, INC	CORPORATE EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124810**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL MCDONALD**

Mailing Address 4543 POST OAK PLACE DR.#231

City	State	Zip Code
HOUSTON	TX	77027

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124812**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM MCDONOUGH**

Mailing Address 8640 RONDADR

City	State	Zip Code
CANTON	MI	48187

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124813**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1078 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICK MCDORMAN**

Mailing Address 408 5TH ST

City	State	Zip Code
MELBA	ID	83641

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.124814**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KELLY M MCDOWELL**

Mailing Address 4413 WAKEFIELD STREET

City	State	Zip Code
MADISON	WI	53711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124816**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERNARD MCELHONE**

Mailing Address 32 WASHINGTON SQUARE W

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124818**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

575.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1079 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MILDRED MCELIGOTT**

Mailing Address 101 MILLSTONE ROAD

City	State	Zip Code
BROUSSARD	LA	70518

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FUELMAN FLEET SERVICES

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124820**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MILDRED MCELLIGOTT**

Mailing Address 101 MILLSTONE ROAD

City	State	Zip Code
BROUSSARD	LA	70518

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MACRO OIL CO.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124822**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL MCEVOY**

Mailing Address 311 FREDERICK STREET

City	State	Zip Code
PLYMOUTH	WI	53073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SARGENTO FOODS INC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124824**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1080 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY MCEVOY**

Mailing Address **943 E KORTSEN RD**

City	State	Zip Code
CASA GRANDE	AZ	85122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17A.124825**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NANCY MCEVOY**

Mailing Address **943 E KORTSEN RD**

City	State	Zip Code
CASA GRANDE	AZ	85122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1100.00**

**Transaction ID : SA17A.124826**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**REGINALD MCFARLAND**

Mailing Address **76 OCEAN OAKS LANE**

City	State	Zip Code
PALM COAST	FL	32137

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PURE TALK USA**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124828**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1250.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1081 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REGINALD MCFARLAND**

Mailing Address 4113 MONTICELLO ST S

City	State	Zip Code
COVINGTON	GA	30014

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PURETALKUSA

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124830**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RP MCFARLAND**

Mailing Address 407 HIGHWAY 229

City	State	Zip Code
SOCIAL CIRCLE	GA	30025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TELRITE

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124832**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES MC FARLANE**

Mailing Address 4226 N THOMPSON AVE.

City	State	Zip Code
CLOVIS	CA	93619

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RED BANKS FARMING

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124834**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1082 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL MCGAUGHAN**

Mailing Address 1911 DEER COVE CC CT

City	State	Zip Code
NORMAL	IL	61761

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.124835**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL MCGAUGHAN**

Mailing Address 1911 DEER COVE CC CT

City	State	Zip Code
NORMAL	IL	61761

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.124836**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL MCGAUGHAN**

Mailing Address 1911 DEER COVE CC CT

City	State	Zip Code
NORMAL	IL	61761

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.124837**

Date of Receipt

**08 / 25 / 2015**

Amount of Each Receipt this Period

15.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

35.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1083 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES MCGILLICUDDY**

Mailing Address 5115 COUNTRY DR.

City	State	Zip Code
OKEMOS	MI	48864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANSING HERNIA CENTER

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124839**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABET MCGIRR**

Mailing Address 218 N NEW ST

City	State	Zip Code
STAUNTON	VA	24401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124840**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARRY L MCGREGOR**

Mailing Address 7425 E PRINCESS BLVD

City	State	Zip Code
SCOTTSDALE	AZ	85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124842**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1084 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS MCGUIRE**

Mailing Address 104 BORDEAUX CT

City	State	Zip Code
BONNERS FERRY	ID	83805

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124844**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN MCINTYRE**

Mailing Address 4814 ARLINGTON BLVD

City	State	Zip Code
ARLINGTON	VA	22204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
JONES DAY

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124846**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GERALD MCINVALE**

Mailing Address 116 WINDRIDGE

City	State	Zip Code
LAGRANGE	GA	30240

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124848**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1085 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BETTY R MCKEE**

Mailing Address 9530 GLYNN DOWNING D

City	State	Zip Code
OOLTEWAH	TN	37363

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

**Transaction ID : SA17A.124850**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

2600.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK MCKEE**

Mailing Address 9530 GLYNN DOWNING D

City	State	Zip Code
OOLTEWAH	TN	37363

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MCKEE BAKERY CO

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

**Transaction ID : SA17A.124852**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

2600.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PHIL MCKEE**

Mailing Address 6 WINDSOR RIDGE

City	State	Zip Code
FRISCO	TX	75034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
APPLIANCE INNOVATION

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124854**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

7900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1086 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOM MCKEE**

Mailing Address 1202 SHADY CREEK ROAD

City	State	Zip Code
MARIOTTSVILLE	MD	21104

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE DEV/GEN. CONTRACTING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124856**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICIA MCKENNA**

Mailing Address 2451 CHISLEHURST DR

City	State	Zip Code
LOS ANGELES	CA	90027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOTCHKIS AND WILEY**

Occupation  
**PORTFOLIO MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124858**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

350.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAUREEN MCKEON**

Mailing Address 7824 W BOULEVARD DR

City	State	Zip Code
ALEXANDRIA	VA	22308

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124860**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1087 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOAN MCKINLEY**

Mailing Address **4129 S DRIFTWOOD DR**

City <b>SPOKANE VALLE</b>	State <b>WA</b>	Zip Code <b>99206</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.124862**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**225.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT MCKINNEY**

Mailing Address **9420 KIRK LN**

City <b>NORTH RICHLAN</b>	State <b>TX</b>	Zip Code <b>76182</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CAPITAL PLUS**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124864**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL MCKINNON**

Mailing Address **4575 VIEWRIDGE AVE**

City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92123</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KUSI TELEVISION**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.124866**

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5625.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1088 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN V MCLAUGHLIN**

Mailing Address 1214 HORIZON DR

City	State	Zip Code
MARSHALL	MN	56258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.124868**

Date of Receipt

**08 / 26 / 2015**

Amount of Each Receipt this Period

210.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN V MCLAUGHLIN**

Mailing Address 1214 HORIZON DR

City	State	Zip Code
MARSHALL	MN	56258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

**Transaction ID : SA17A.124869**

Date of Receipt

**09 / 14 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM MCLAUGHLIN**

Mailing Address 1613 ALLENWOOD ROAD

City	State	Zip Code
WALL	NJ	07719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124871**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

660.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1089 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DARLEEN MCLENNON**

Mailing Address 2068 SKILLMAN AVENUE W

City	State	Zip Code
SAINT PAUL	MN	55113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.124873**

Date of Receipt

**07** / **27** / **2015**

Amount of Each Receipt this Period

275.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES MCLRAVY**

Mailing Address 451 CAMBRIDGE BLVD S

City	State	Zip Code
GRAND RAPIDS	MI	49506

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EXXONMOBIL CORP

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124875**

Date of Receipt

**07** / **31** / **2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALLYSON MCMAHON**

Mailing Address 5151 WISCONSIN AVENUE NW, SUITE 30

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MILLER & LONG

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128934**

Date of Receipt

**07** / **31** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1275.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1090 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ALLYSON MCMAHON**

Mailing Address **5151 WISCONSIN AVENUE NW, SUITE 30**

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILLER & LONG**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128936**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ARIS MCMAHON**

Mailing Address **6908 PARK TERRACE DRIVE**

City	State	Zip Code
ALEXANDRIA	VA	22307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ADVANTAGE, INC.**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124877**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BERNARD MCMAHON**

Mailing Address **816 CROWN CIRCLE**

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124879**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1091 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BERNARD MCMAHON**

Mailing Address **816 CROWN CIRCLE**

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.124880**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EVAN BRETT MCMAHON**

Mailing Address **5151 WISCONSIN AVENUE NW, SUITE 30**

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MILLER & LONG**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**10800.00**

**Transaction ID : SA17A.124882**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REDESIGNATION & REATTRIBUTION

Amount of Each Receipt this Period

**10800.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EVAN BRETT MCMAHON**

Mailing Address **5151 WISCONSIN AVENUE NW, SUITE 30**

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MILLER & LONG**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**8100.00**

**Transaction ID : SA17A.128930**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**10900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1092 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EVAN BRETT MCMAHON**

Mailing Address 5151 WISCONSIN AVENUE NW, SUITE 30

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILLER & LONG**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.128931**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EVAN BRETT MCMAHON**

Mailing Address 5151 WISCONSIN AVENUE NW, SUITE 30

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILLER & LONG**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128932**

Date of Receipt

**07 / 31 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EVAN BRETT MCMAHON**

Mailing Address 5151 WISCONSIN AVENUE NW, SUITE 30

City	State	Zip Code
WASHINGTON	DC	20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILLER & LONG**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128935**

Date of Receipt

**07 / 31 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1093 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL F MCMAHON**

Mailing Address PO BOX 1713

City	State	Zip Code
HELENA	MT	59624

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124884**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL F MCMAHON**

Mailing Address PO BOX 1713

City	State	Zip Code
HELENA	MT	59624

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124885**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUZANNE MCMAINS**

Mailing Address 4180 S. RANCH ROAD

City	State	Zip Code
SIERRA VISTA	AZ	85650

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.124886**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

575.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**VINCENT MCMANUS**

Mailing Address **1 BLACKBERRY LN**

City	State	Zip Code
WALLINGFORD	CT	06492

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124888**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VINCENT MCMANUS**

Mailing Address **1 BLACKBERRY LN**

City	State	Zip Code
WALLINGFORD	CT	06492

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124889**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KELLY MCMILLAN**

Mailing Address **27705 N 15TH DR**

City	State	Zip Code
PHOENIX	AZ	85085

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MFSINC**

Occupation  
**MANUFACTURING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124891**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1095 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SETH M MCMILLIAN**

Mailing Address 1295 N 1600 EAST RD

City	State	Zip Code
TAYLORVILLE	IL	62568

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSTRUCTION**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124893**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONLIE MCMULLIN**

Mailing Address 202 S 1ST

City	State	Zip Code
COPPERAS COVE	TX	76522

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE BROKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124895**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL MCMURRAY**

Mailing Address 400 LOWER DUG GAP RD. S.W.

City	State	Zip Code
DALTON	GA	30720

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124897**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1096 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARRY MCNALL**

Mailing Address 4865 ANDREA DR NW

City	State	Zip Code
SALEM	OR	97304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.124899**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL MCNALLY**

Mailing Address 1426 N HARWOOD ST

City	State	Zip Code
ORANGE	CA	92867

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PROPERTY MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124901**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS MCNARON**

Mailing Address 1005 NOBLE ST

City	State	Zip Code
ANNISTON	AL	36201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MCNARON GROUP, INC.

Occupation  
INVESTMENT ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124903**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

600.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1097 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MILTON MCNEELY**

Mailing Address 2495 E FM 1151

City	State	Zip Code
AMARILLO	TX	79118

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
INDEPENDENT INVESTMENT CORPORATION	GENERAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124905**

Date of Receipt

MM / DD / YYYY  
07 / 18 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROLE MCNEIL**

Mailing Address 1001 CALIFORNIA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94920

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
SELF-EMPLOYED	REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124907**

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT MCNICHOLS**

Mailing Address 3333 PETERS CREEK ROAD NW

City	State	Zip Code
ROANOKE	VA	24019

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
CSM, INC.	CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124909**

Date of Receipt

MM / DD / YYYY  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1098 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES MCNITT**

Mailing Address 306 E WASHINGTON

City	State	Zip Code
SAINT LOUIS	MI	48880

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124911**

Date of Receipt

**08 / 09 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT MCPHERSON**

Mailing Address ONE NORTH BEACON PLACE #310

City	State	Zip Code
LA GRANGE	IL	60525

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MCPHERSON PUBLIC AFFAIRS GROUP, INC.

Occupation  
PUBLIC RELATIONS EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124913**

Date of Receipt

**07 / 10 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT MCPHERSON**

Mailing Address ONE NORTH BEACON PLACE #310

City	State	Zip Code
LA GRANGE	IL	60525

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MCPHERSON PUBLIC AFFAIRS GROUP, INC.

Occupation  
PUBLIC RELATIONS EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124914**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1099 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN MCQUEENEY**

Mailing Address **2830 S HULEN ST**

City

**FORT WORTH**

State

**TX**

Zip Code

**76109**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124916**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DUNCAN MCRAE**

Mailing Address **327 GLEN ERICA**

City

**SHREVEPORT**

State

**LA**

Zip Code

**71106**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124918**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM MCREYNOLDS**

Mailing Address **833 STONEFIELD DRIVE @204**

City

**MOUNT PLEASANT**

State

**WI**

Zip Code

**53406**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**INFORMATION REQUESTED**

Occupation

**INFORMATION REQUESTED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124920**

Date of Receipt

**08 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1100 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BEVERLY B MCVEY**

Mailing Address 11925 S 49TH WEST AVE

City	State	Zip Code
SAPULPA	OK	74066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BEVERLY HOUSE**

Occupation  
**FARMER/ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124922**

Date of Receipt

**09 / 03 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LISLE MCVICKER**

Mailing Address 910 HICKORY ST.

City	State	Zip Code
SANTA ANA	CA	92701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PARKER HANNIFIN CORP**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124923**

Date of Receipt

**08 / 22 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROD MCWILLIAMS**

Mailing Address 11149 N. LINCOLNSHIRE DRIVE

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KOHL'S DEPARTMENT STORES**

Occupation  
**BUSINESS CONTINUITY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124925**

Date of Receipt

**07 / 03 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1101 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GAVIN MEAD**

Mailing Address 1267 PONTI MEWS

City	State	Zip Code
ATLANTA	GA	30318

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124927**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALEXANDRIA MECCIA**

Mailing Address 7520 RIDGEWOOD LANE

City	State	Zip Code
BURR RIDGES	IL	60527

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DERMATOLOGY ASSOCIATES OF  
LACRANCE

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124929**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM MEDDERS II**

Mailing Address 2100 CLARINDA AVE

City	State	Zip Code
WICHITA FALLS	TX	76308

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
OIL PRODUCER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124931**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1102 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOE MEDINA**

Mailing Address **2216 SUNKIST AVE**

City	State	Zip Code
WAUKESHA	WI	53188

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
1ST CONGREGATIONAL CHURCH OF GENIS	MINISTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124933**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD MEHREN II**

Mailing Address **215 N NORTON AVE**

City	State	Zip Code
LOS ANGELES	CA	90004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
NORTHWESTERN MUTUAL	WEALTH MANAGEMENT ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124935**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HEATHER A MEIER**

Mailing Address **7914 W WRIGHT ST**

City	State	Zip Code
WAUWATOSA	WI	53213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124937**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3200.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1103 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES MEISSNER**

Mailing Address 5806 PAINTED VALLEY DR

City	State	Zip Code
AUSTIN	TX	78759

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124939**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID MEISTER**

Mailing Address 9700 W BLUEMOUND ROAD

City	State	Zip Code
MILWAUKEE	WI	53226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ISC INTERNATIONAL

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124941**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAREN MEISTER**

Mailing Address 560 HARBOR COVE CIRCLE

City	State	Zip Code
LONGBOAT KEY	FL	34228

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124943**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1104 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABETH MELLON**

Mailing Address 1201 BARLEY MILL ROAD

City	State	Zip Code
GREENVILLE	DE	19801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128781**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY MELLON**

Mailing Address 1201 BARLEY MILL ROAD

City	State	Zip Code
GREENVILLE	DE	19801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.124945**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HENRY MELLON**

Mailing Address 1201 BARLEY MILL ROAD

City	State	Zip Code
GREENVILLE	DE	19801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128779**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1105 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN MELLOWES**

Mailing Address 1212 W GLEN OAKS LANE

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHARTER MFG

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.124947**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LYNDEN MELMED**

Mailing Address 5922 OVERLEA ROAD

City	State	Zip Code
BETHESDA	MD	20816

FEC ID number of contributing federal political committee.

C

Name of Employer  
BERRY APPLEMAN & LEIDEN LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124949**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 09 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREA R MELNYK**

Mailing Address 802 KENNICOTT PLACE

City	State	Zip Code
MOUNT PROSPEC	IL	60056

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124951**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1106 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GENE MELTON**

Mailing Address 2901 FINCHLEY LN

City	State	Zip Code
OKLAHOMA CITY	OK	73120

FEC ID number of contributing federal political committee.

C

Name of Employer  
GENE MELTON

Occupation  
INSURANCE AGENCY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124953**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			27			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES MENDENHALL**

Mailing Address 1244 NORTHSHORE ROAD

City	State	Zip Code
LAKE OSWEGO	OR	97034

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124955**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEBORAH S MENGEL**

Mailing Address 517 CHEYENNE DR

City	State	Zip Code
WAUKESHA	WI	53188

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124957**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1107 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MAGGIE MENZEL**

Mailing Address 1211 ELECTRIC AVE.

City	State	Zip Code
SEAL BEACH	CA	90740

FEC ID number of contributing federal political committee.

C

Name of Employer  
TFS

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124958**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NORMA MERIWETHER**

Mailing Address 2251 GLENMOOR ROAD NORT

City	State	Zip Code
CLEARWATER	FL	33764

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.124959**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DIANE MERRICK**

Mailing Address 2405 MARBROOK COURT

City	State	Zip Code
RENO	NV	89519

FEC ID number of contributing federal political committee.

C

Name of Employer  
MERRICK ANIMAL NUTRITION, INC

Occupation  
OWNER EXEC VP, CORPORATE SEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124961**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2875.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1108 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

CHARLES MERRIMAN

Mailing Address 5507 CARY STREET ROAD

City	State	Zip Code
RICHMOND	VA	23226

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.124963

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

DIANE MERTZ

Mailing Address 69 HESTERS CT

City	State	Zip Code
SAINT CHARLES	MO	63304

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.124965

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			24			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

REBECCA MERWIN

Mailing Address W4322 LINTON RD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.124967

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3950.00

Total This Period (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1109 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REBECCA MERWIN**

Mailing Address **W4322 LINTON RD**

City <b>LAKE GENEVA</b>	State <b>WI</b>	Zip Code <b>53147</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1125.00**

**Transaction ID : SA17A.124968**

Date of Receipt

M M / D D / Y Y Y Y
08 / 24 / 2015

Amount of Each Receipt this Period

**125.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK MESSINGER**

Mailing Address **PMB 168 - 13023 NE HWY 99 #7**

City <b>VANCOUVER</b>	State <b>WA</b>	Zip Code <b>98686</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124970**

Date of Receipt

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NORMAN METCALFE**

Mailing Address **2007 BAYSTONE TERRACE**

City <b>CORONA DEL MAR</b>	State <b>CA</b>	Zip Code <b>92675</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.124972**

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5775.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1110 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NORMAN METCALFE**

Mailing Address 2007 BAYSTONE TERRACE

City	State	Zip Code
CORONA DEL MAR	CA	92675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128722**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUZANNE METCALFE**

Mailing Address 2007 BAYSTONE TERRACE

City	State	Zip Code
CORONA DEL MAR	CA	92675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128724**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOROTHY METZ**

Mailing Address 4729 SINGING TREES DR

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MCDONALDS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124973**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1111 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL MEYER**

Mailing Address **6374 CREEKSIDE WAY**

City <b>HAMILTON</b>	State <b>OH</b>	Zip Code <b>45011</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CTI FREIGHT SERVICES**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124975**

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE MEYER**

Mailing Address **14940 JUNEAU BLVD**

City <b>ELM GROVE</b>	State <b>WI</b>	Zip Code <b>53122</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KAHLER SLATER**

Occupation  
**ARCHITECT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124977**

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HENRY H MEYER, JR**

Mailing Address **PO BOX 149**

City <b>WAKEFIELD</b>	State <b>RI</b>	Zip Code <b>02880</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.124979**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period

**400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1112 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HENRY H MEYER, JR**

Mailing Address PO BOX 149

City	State	Zip Code
WAKEFIELD	RI	02880

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.124980**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LOU ANN MEYER**

Mailing Address 4921 REMIKER LANE

City	State	Zip Code
MANITOWOC	WI	54220

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.124982**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN MEYERS**

Mailing Address 2000 CARLETON PL

City	State	Zip Code
FORT SMITH	AR	72908

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124984**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1113 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LUCY MEYERS**

Mailing Address 398 MOUNTAIN RD

City	State	Zip Code
JAFFREY	NH	03452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NOT EMPLOYED

Occupation  
STUDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124986**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN C MEYERS**

Mailing Address 398 MOUNTAIN RD

City	State	Zip Code
JAFFREY	NH	03452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SCM ASSOCIATES

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.124988**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEAN MICHAELS**

Mailing Address 2181 FREYDALE RD SE

City	State	Zip Code
MARIETTA	GA	30067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.124990**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

350.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1114 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEAN MICHAELS**

Mailing Address 2181 FREYDALE RD SE

City	State	Zip Code
MARIETTA	GA	30067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

**Transaction ID : SA17A.124991**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM MICHAUX**

Mailing Address 1600 WESTBROOK AVE, APT 743

City	State	Zip Code
RICHMOND	VA	23227

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.124992**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GAYLE MICHEL**

Mailing Address 165 N CANAL ST  
6

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
B/A

Occupation  
NOT CURRENTLY EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.124994**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1115 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**J. MIDDENDORF**

Mailing Address **P.O. BOX 1037**

City State Zip Code  
**LITTLE COMPTON RI 02837**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.124996**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MARK MIDDLEMAN**

Mailing Address **9631 MCCULLOUGH AVE.**

City State Zip Code  
**SAN ANTONIO TX 78216**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**COMMERCIAL CONSTRUCTION  
CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.124998**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM MIDDLETON**

Mailing Address **596 E MCCULLOCH BLVD**

City State Zip Code  
**PUEBLO WEST CO 81007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.124999**

Date of Receipt

**08 / 08 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1550.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1116 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**KELLY MIKULES**

Mailing Address 7035 CORINTIA STREET

City	State	Zip Code
CARLSBAD	CA	92009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.125001**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ANTHONY MILAZZO**

Mailing Address W302 S1580 BRANDYBROOK RD

City	State	Zip Code
WAUKESHA	WI	53188

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RESTAURANT OWNER CULVERS

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125003**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AUDREY MILLER**

Mailing Address 74 PARK LANE

City	State	Zip Code
CONCORD	MA	01742

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125005**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3000.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1117 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA MILLER**

Mailing Address **BELCUESTER ROAD**

City	State	Zip Code
KENNEDYVILLE	MD	21645

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125007**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRENT MILLER**

Mailing Address **4347 BRIDGEHAVEN DRIVE**

City	State	Zip Code
SMYRNA	GA	30080

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIMEDX**

Occupation  
**EXEC. VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125009**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS MILLER**

Mailing Address **PO BOX 5493**

City	State	Zip Code
WACO	TX	76708

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125011**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1118 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS MILLER**

Mailing Address 8430 N 980 EAST RD

City	State	Zip Code
INDIANOLA	IL	61850

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

206.00

**Transaction ID : SA17A.125012**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

103.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALDIN MILLER**

Mailing Address 3815 BEVERLY DRIVE

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125014**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARVEY MILLER**

Mailing Address 485 EAST HALF DAY ROAD

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125016**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1603.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1119 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK MILLER**

Mailing Address 485 E HALF DAY RD

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125018**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOE MILLER**

Mailing Address 3400 HOLLY HILL RD

City	State	Zip Code
LAKE CHARLES	LA	70605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125020**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH MILLER**

Mailing Address 6617 E ORCHARD PL

City	State	Zip Code
CENTENNIAL	CO	80111

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEC

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125021**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1120 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH MILLER**

Mailing Address 6617 E ORCHARD PL

City	State	Zip Code
CENTENNIAL	CO	80111

FEC ID number of contributing federal political committee.

C

Name of Employer  
TEC

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.125022**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUNE MILLER**

Mailing Address 19 DEVON WAY

City	State	Zip Code
HASTINGS ON H	NY	10706

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.125024**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

600.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARC MILLER**

Mailing Address 51 EAST RIDGE LANE

City	State	Zip Code
MOUNT KISCO	NY	10549

FEC ID number of contributing federal political committee.

C

Name of Employer  
MLTP RED ERLATE SECURIES

Occupation  
COMMERCIAL REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125026**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1121 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATT MILLER**

Mailing Address 3716 SW MT ADAMS DR

City	State	Zip Code
PORTLAND	OR	97239

FEC ID number of contributing federal political committee.

C

Name of Employer  
JHS

Occupation  
STOCKBROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125028**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MATTHEW MILLER**

Mailing Address 29 BLAIR DR

City	State	Zip Code
HUNTINGTON	NY	11743

FEC ID number of contributing federal political committee.

C

Name of Employer  
SSM REALTY

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125030**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
REAL ESTATE INVESTMENTS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.125032**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

11550.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128840**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128841**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128842**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1123 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-5400.00

**Transaction ID : SA17A.128845**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL MILLER**

Mailing Address 4402 BOXWOOD ROAD

City	State	Zip Code
BETHESDA	MD	20816

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125034**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MIRIAM MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128844**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

500.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1124 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MIRIAM MILLER**

Mailing Address 3611 MOTOR AVENUE, SUITE 100

City	State	Zip Code
LOS ANGELES	CA	90034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128846**

Date of Receipt

**08 / 28 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NATHAN MILLER**

Mailing Address 478 WINDWOOD LN

City	State	Zip Code
BOONE	NC	28607

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MILLER & JOHNSON, PLLC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125036**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER M MILLER**

Mailing Address 3614 SHUKLA CT

City	State	Zip Code
WALNUT CREEK	CA	94598

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226.00

**Transaction ID : SA17A.125037**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

113.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

363.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1125 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RHONDA MILLER**

Mailing Address 460 GREEN BAY RD

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125039**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL MILLET**

Mailing Address 1000 S ERVAY ST

City	State	Zip Code
DALLAS	TX	75201-6422

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MILLET THE PRINTER, INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125041**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANNE MILLIGAN**

Mailing Address 546 LAKELAND ST

City	State	Zip Code
GROSSE POINTE	MI	48230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BOOMER CONSTRUCTION MATERIALS

Occupation  
VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125043**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1126 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A.** Full Name (Last, First, Middle Initial)

CHARLES MILLIKIN

Mailing Address 2347 ESTATE GATE DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78260

FEC ID number of contributing federal political committee.

C

Name of Employer  
RENTAL PROPTERYOccupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

Transaction ID : SA17A.125045

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

253.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)

PAMELA MILLIS

Mailing Address 408 S WALKER WAY

City	State	Zip Code
SUN PRAIRIE	WI	53590

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.125047

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)

REGINA M MILLNER

Mailing Address 25 FULLER DRIVE

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Transaction ID : SA17A.125049

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3253.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1127 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GRADY S MILLS**

Mailing Address 1181 FOXMOOR PL

City	State	Zip Code
FOREST	VA	24551

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.125050**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDRA R MILLS**

Mailing Address 1500 RUE REYNARD ST

City	State	Zip Code
MENASHA	WI	54952

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RESEARCH

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125052**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J. C MILNE**

Mailing Address 1312 SW 16TH AVE

City	State	Zip Code
PORTLAND	OR	97201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PROPERTY MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125054**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1128 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT MILOTTE**

Mailing Address 15532 MONTEROSSO LANE

City	State	Zip Code
NAPLES	FL	34110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125056**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			06			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT MILOTTE JR**

Mailing Address 15532 MONTEROSSO LANE  
NO. 102

City	State	Zip Code
NAPLES	FL	34110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125058**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LORRAINE MINER**

Mailing Address 82 BARBOURTOWN ROAD

City	State	Zip Code
CANTON	CT	06019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MINERS INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125060**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1129 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEN MINESINGER**

Mailing Address 17301 AVENLEIGH DRIVE

City	State	Zip Code
ASHTON	MD	20861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GREENBERG TRAURIG LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125062**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NADINE T MINNIG**

Mailing Address 964 EDGEBROOK LN

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125064**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NADINE T MINNIG**

Mailing Address 964 EDGEBROOK LN

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125065**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1130 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A.** Full Name (Last, First, Middle Initial)

BURTON D MINOR

Mailing Address 2S216 RIVERSIDE AVENUE

City	State	Zip Code
WARRENVILLE	IL	60555

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.125067

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			14			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)

DON MINQA

Mailing Address 872 BRUSHY VALLEY RD

City	State	Zip Code
HEISKELL	TN	37754

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Transaction ID : SA17A.125069

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			24			2015			

Amount of Each Receipt this Period

1200.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)

SUZAN MITCHELL

Mailing Address 1110 ESPLANADE UNIT 2

City	State	Zip Code
REDONDO BEACH	CA	90277

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Transaction ID : SA17A.125071

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

550.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2000.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1131 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS MITCHEM**

Mailing Address 1616 W GLENDALE AV  
#588

City State Zip Code  
PHOENIX AZ 85021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125073**

Date of Receipt

M M / D D / Y Y Y Y  
07 15 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH E MITCHEM**

Mailing Address 651 SHADOWVIEW CT

City State Zip Code  
TURLOCK CA 95382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.125074**

Date of Receipt

M M / D D / Y Y Y Y  
08 17 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH E MITCHEM**

Mailing Address 651 SHADOWVIEW CT

City State Zip Code  
TURLOCK CA 95382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

292.00

**Transaction ID : SA17A.125075**

Date of Receipt

M M / D D / Y Y Y Y  
08 17 2015

Amount of Each Receipt this Period

57.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

507.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1132 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH E MITCHEM**

Mailing Address **651 SHADOWVIEW CT**

City <b>TURLOCK</b>	State <b>CA</b>	Zip Code <b>95382</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**327.00**

**Transaction ID : SA17A.125076**

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK MITTAL**

Mailing Address **845 GAGE DRIVE**

City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92106</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125078**

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL MIXON**

Mailing Address **703 SW AVENUE J**

City <b>SEMINOLE</b>	State <b>TX</b>	Zip Code <b>79360</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125080**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1285.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1133 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY MIZEL**

Mailing Address 4350 S MONACO ST

City	State	Zip Code
DENVER	CO	80237

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHARIMAN OF THE BOARD/CEO

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRIS MLEINEK**

Mailing Address 1331 27TH AVENUE

City	State	Zip Code
RICE LAKE	WI	54868

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125084**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDY MOAG**

Mailing Address 616 W. SCHUBERT, 4E

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125086**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1134 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELISE MOCK**

Mailing Address P.O. BOX 393

City	State	Zip Code
MATTAPOISETT	MA	02739

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NEW BEDFORD THREAD CO., INC.

Occupation  
ADMINISTRATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125088**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD MOCKLER**

Mailing Address 1444 GREATHOUSE RD

City	State	Zip Code
WAXAHACHIE	TX	75167

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.125089**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES MODE**

Mailing Address W6691 KIESLING ROAD

City	State	Zip Code
JEFFERSON	WI	53549

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125091**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1135 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANITA L MOELLER**

Mailing Address **N2269 FALLING WING LN**

City	State	Zip Code
<b>HORTONVILLE</b>	<b>WI</b>	<b>54944</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125093**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
<b>07</b>			<b>16</b>			<b>2015</b>			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDITH A MOELLER**

Mailing Address **PO BOX 357**

City	State	Zip Code
<b>SAINT ALBANS</b>	<b>MO</b>	<b>63073</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125095**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
<b>07</b>			<b>29</b>			<b>2015</b>			

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM MOELLER**

Mailing Address **11093 E ROLLING ROCK DR**

City	State	Zip Code
<b>SCOTTSDALE</b>	<b>AZ</b>	<b>85262</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125097**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
<b>07</b>			<b>15</b>			<b>2015</b>			

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1136 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JERRY MOISON**

Mailing Address **737 BRENTWOOD PLACE**

City	State	Zip Code
LOS ALTOS	CA	94024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125099**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RANDALL C MOLES**

Mailing Address **1833 S MAIN STREET**

City	State	Zip Code
RACINE	WI	53403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125101**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BERNHARD P MOLLDREM**

Mailing Address **320 HIGHLAND AVE**

City	State	Zip Code
SYRACUSE	NY	13203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**375.00**

**Transaction ID : SA17A.125102**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

**225.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**975.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1137 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MORRIS MONESSON**

Mailing Address 9518 OPOSSUMTOWN PIK

City	State	Zip Code
FREDERICK	MD	21702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

216.00

**Transaction ID : SA17A.125104**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

216.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MORRIS MONESSON**

Mailing Address 9518 OPOSSUMTOWN PIK

City	State	Zip Code
FREDERICK	MD	21702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

414.00

**Transaction ID : SA17A.125105**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

198.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID "BRAD" MONEY**

Mailing Address 825 E ORCHARD VIEW DR

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ABC SUPPLY COMPANY

Occupation  
BUSINESS MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125107**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3114.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1138 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

SAM MONK

Mailing Address 25 WESPANEE DR

City	State	Zip Code
CHARLESTON	SC	29407

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17A.125109

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

DEBORAH MONTANGE

Mailing Address 8714 MELROSE

City	State	Zip Code
SAN ANTONIO	TX	78250

FEC ID number of contributing federal political committee.

C

Name of Employer  
USAAOccupation  
INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.125111

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

MARY MONTGOMERY

Mailing Address 200 WALKER ROAD

City	State	Zip Code
CARROLLTON	GA	30117

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.125113

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3450.00

Total This Period (last page this line number only).....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1139 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM MONTGOMERY**

Mailing Address 1301 MCCARTNY ROAD

City	State	Zip Code
LEMONT	IL	60439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125115**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERRY MOODY**

Mailing Address 3176 OIL MILL RD

City	State	Zip Code
COVINGTON	TN	38019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BOARDWALK PIPELINE

Occupation  
RML

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125117**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TERRY MOODY**

Mailing Address 3176 OIL MILL RD

City	State	Zip Code
COVINGTON	TN	38019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BOARDWALK PIPELINE

Occupation  
RML

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.125118**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 1140 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

DAVID MOORE

Mailing Address 10902 MEMORIAL DRIVE

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17A.125120

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

DAVID MOORE

Mailing Address 10902 MEMORIAL DRIVE

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.125120.0

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item**C. Full Name (Last, First, Middle Initial)**

JENNIFER MOORE

Mailing Address 10902 MEMORIAL DR

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing federal political committee.

C

Name of Employer  
BLINGGUARD LLCOccupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17A.125120.1

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1141 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DETLEF MOORE**

Mailing Address 3704 N LAKE DRIVE

City	State	Zip Code
SHOREWOOD	WI	53211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125122**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEANNE MOORE**

Mailing Address 555 SPRING CANYON RD

City	State	Zip Code
DOUGLAS	WY	82633

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125124**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			24			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEITH MOORE**

Mailing Address 2600 W 7TH ST  
APT 2746

City	State	Zip Code
FORT WORTH	TX	76107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**4FRONT ENGINEERED SOLUTIONS, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125126**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1142 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH MOORE**

Mailing Address 2600 W 7TH ST  
APT 2746

City State Zip Code  
FORT WORTH TX 76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
4FRONT ENGINEERED SOLUTIONS, INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : SA17A.125127**

Date of Receipt

M M / D D / Y Y Y Y  
07 16 2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH L MOORE**

Mailing Address 284 ALPAT DR

City State Zip Code  
DILLSBURG PA 17019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125129**

Date of Receipt

M M / D D / Y Y Y Y  
07 27 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARRY E MOORE**

Mailing Address 2876 DRUID HILL DR

City State Zip Code  
DES MOINES IA 50315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125131**

Date of Receipt

M M / D D / Y Y Y Y  
07 29 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

975.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1143 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHELE MOORE**

Mailing Address 200 W MONROE STREET, STE 1440

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128885**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MOLLY ANN MOORE**

Mailing Address 14 MARTIN LANE

City	State	Zip Code
ENGLEWOOD	CO	80113

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125133**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NOEL MOORE**

Mailing Address 200 W MONROE STREET, STE 1440

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SENNEX SOLUTIONS

Occupation  
COMMODITY TRADER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125135**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1144 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

NOEL MOORE

Mailing Address 200 W MONROE STREET, STE 1440

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

Transaction ID : SA17A.128883

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item**B. Full Name (Last, First, Middle Initial)**

SAM MOORE

Mailing Address 33 NORTHUMBERLAND

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.125137

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

DARREL MOR

Mailing Address 23 KANSAS AVENUE

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17A.125139

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1500.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1145 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRANK MORAN**

Mailing Address P.O. BOX 4848

City

SHREVEPORT

State

LA

Zip Code

71134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

OIL PRODUCTION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.125141**

Date of Receipt

MM / DD / YYYY  
08 / 17 / 2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALICE MORAVA**

Mailing Address 118 CIRCLE PKWY

City

WILLIAMS BAY

State

WI

Zip Code

53191

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125143**

Date of Receipt

MM / DD / YYYY  
07 / 20 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RUTH ANN MORAVA**

Mailing Address 180 CIRCLE PKWY

City

WILLIAMS BAY

State

WI

Zip Code

53191

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125145**

Date of Receipt

MM / DD / YYYY  
07 / 17 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1146 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BAY MORGAN**

Mailing Address **1517 SE 4TH STREET**

City	State	Zip Code
DEERFIELD BEACH	FL	33441

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIAMI DADE COUNTY**

Occupation  
**FIREFIGHTER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.125147**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	5

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID MORGAN**

Mailing Address **P O BOX 780849**

City	State	Zip Code
SAN ANTONIO	TX	78278

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SBSCONSTRUCTION**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125149**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID MORGAN**

Mailing Address **P O BOX 780849**

City	State	Zip Code
SAN ANTONIO	TX	78278

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SBSCONSTRUCTION**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.125150**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	5

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**553.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1147 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD MORGAN**

Mailing Address **631 CROFTON ROAD**

City <b>BLACKSTOCK</b>	State <b>SC</b>	Zip Code <b>29014</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.125151**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOSEPH MORGAN**

Mailing Address **2995 N NICOLET DRIVE**

City <b>GREEN BAY</b>	State <b>WI</b>	Zip Code <b>54311</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125153**

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDY MORGAN**

Mailing Address **1549 GREENWOOD**

City <b>DEERFIELD</b>	State <b>IL</b>	Zip Code <b>60015</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128787**

Date of Receipt

M M / D D / Y Y Y Y
06 / 18 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1148 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL MORGAN**

Mailing Address 1549 GREENWOOD

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMLIN COSMETICS

Occupation  
BATH AMENITIES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125155**

Date of Receipt

M M / D D / Y Y Y Y  
06 18 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL MORGAN**

Mailing Address 1549 GREENWOOD

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMLIN COSMETICS

Occupation  
BATH AMENITIES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128785**

Date of Receipt

M M / D D / Y Y Y Y  
06 18 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM MORGAN**

Mailing Address 12215 ASHAWAY LANE

City State Zip Code  
FRISCO TX 75035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125157**

Date of Receipt

M M / D D / Y Y Y Y  
07 15 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)** .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1149 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM MORGAN**

Mailing Address 3110 DEL RIO PIKE

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN BOUCHARD & SONS CO.**

Occupation  
**MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125159**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDSAY S MOROUN**

Mailing Address 160 PROVENCAL ROAD

City	State	Zip Code
GROSS POINTE FARMS	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125161**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDSAY S MOROUN**

Mailing Address 160 PROVENCAL ROAD

City	State	Zip Code
GROSS POINTE FARMS	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125161.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1150 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDSAY S MOROUN**

Mailing Address 160 PROVENCAL ROAD

City	State	Zip Code
GROSS POINTE FARMS	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125161.1**

Date of Receipt

MM / DD / YYYY  
09 / 21 / 2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MANUEL MOROUN**

Mailing Address 956 LAKE SHORE ROAD

City	State	Zip Code
GROSSE POINTE SHORES	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CENTRA INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125163**

Date of Receipt

MM / DD / YYYY  
09 / 21 / 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MANUEL MOROUN**

Mailing Address 956 LAKE SHORE ROAD

City	State	Zip Code
GROSSE POINTE SHORES	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CENTRA INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125163.0**

Date of Receipt

MM / DD / YYYY  
09 / 21 / 2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1151 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MANUEL MOROUN**

Mailing Address 956 LAKE SHORE ROAD

City	State	Zip Code
GROSSE POINTE SHORES	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CENTRA INC

Occupation  
CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125163.1**

Date of Receipt

**09 / 21 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MATTHEW T MOROUN**

Mailing Address 160 PROVENÇAL ROAD

City	State	Zip Code
GROSS POINTE FARMS	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125165**

Date of Receipt

**09 / 21 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MATTHEW T MOROUN**

Mailing Address 160 PROVENÇAL ROAD

City	State	Zip Code
GROSS POINTE FARMS	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125165.0**

Date of Receipt

**09 / 21 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1152 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATTHEW T MOROUN**

Mailing Address 160 PROVENCAL ROAD

City	State	Zip Code
GROSS POINTE FARMS	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125165.1**

Date of Receipt

**09 / 21 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NORA MOROUN**

Mailing Address 956 LAKE SHORE ROAD

City	State	Zip Code
GROSSE POINTE SHORES	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5300.00

**Transaction ID : SA17A.125167**

Date of Receipt

**09 / 28 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NORA MOROUN**

Mailing Address 956 LAKE SHORE ROAD

City	State	Zip Code
GROSSE POINTE SHORES	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125167.0**

Date of Receipt

**09 / 28 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2600.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5300.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1153 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NORA MOROUN**

Mailing Address 956 LAKE SHORE ROAD

City	State	Zip Code
GROSSE POINTE SHORES	MI	48236

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5300.00

**Transaction ID : SA17A.125167.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2600.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT E MORRIS**

Mailing Address 98 RIVERSIDE AVE

City	State	Zip Code
RIVERSIDE	CT	06878

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
O'CONNOR DAVIES LLP

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125169**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD MORRISON**

Mailing Address 411 GENTLEMEN'S RIDGE

City	State	Zip Code
SIGNAL MOUNTAIN	TN	37377

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MSA, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125170**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1154 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS MORRISON**

Mailing Address 912 S PARKPLACE DRIVE

City	State	Zip Code
PALATINE	IL	60067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125172**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK MORROW**

Mailing Address 1268 MOUNTAIN VIEW D

City	State	Zip Code
DALLAS	PA	18612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125174**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH R MORSE**

Mailing Address 6309 N PARK WAY

City	State	Zip Code
TACOMA	WA	98407

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

313.17

**Transaction ID : SA17A.125175**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1155 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH R MORSE**

Mailing Address **6309 N PARK WAY**

City	State	Zip Code
TACOMA	WA	98407

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**423.17**

**Transaction ID : SA17A.125176**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

**110.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LEANNE M MORSE**

Mailing Address **W178 N102099 WHITETA**

City	State	Zip Code
GERMANTOWN	WI	53022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125178**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LEANNE M MORSE**

Mailing Address **W178 N102099 WHITETA**

City	State	Zip Code
GERMANTOWN	WI	53022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**550.00**

**Transaction ID : SA17A.125179**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**660.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1156 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

JAMES K MORTENSON

Mailing Address 6520 WAZEECHA AVE

City

WISCONSIN RAP

State

WI

Zip Code

54494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MORTENSON BROS FARMS

Occupation

FARMER

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125181**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

RICHARD MORTON

Mailing Address 108 TALAVERA PLACE

City

PALM BEACH GARDENS

State

FL

Zip Code

33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125183**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

RICHARD MORTON

Mailing Address 108 TALAVERA PLACE

City

PALM BEACH GARDENS

State

FL

Zip Code

33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

775.00

**Transaction ID : SA17A.125184**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	5

Amount of Each Receipt this Period

275.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3475.00

Total This Period (last page this line number only).....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1157 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**YOLANDA A MORTON**

Mailing Address 16262 PINEVIEW RD

City	State	Zip Code
SANTA CLARITA	CA	91387

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MORTON GRINDING**

Occupation  
**SELF-EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125186**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FURMAN MOSELEY**

Mailing Address 1202 39TH AVENUE E.

City	State	Zip Code
SEATTLE	WA	98144

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125188**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROGER MOSER**

Mailing Address 5088 MONTICELLO RD

City	State	Zip Code
FULTON	MO	65251

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MOSER RENTALS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125190**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1158 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE MOSHER**

Mailing Address **825 N PROSPECT AVE**

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125192**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE MOSHER**

Mailing Address **825 N PROSPECT AVE**

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125193**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JULIE MOSHER**

Mailing Address **825 N PROSPECT AVE**

**S**

City	State	Zip Code
MILWAUKEE	WI	53202

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125195**

Date of Receipt

**07** / **08** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1159 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN MOSLING**

Mailing Address 6075 PELICAN BAY BLVD A

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125197**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL MOSS**

Mailing Address 942 FAIRWAY DRIVE

City	State	Zip Code
BAKERSFIELD	CA	93309

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
COLLECTION AGENCY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125199**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN W MOTTER**

Mailing Address 590 CENTRAL DR

City	State	Zip Code
SOUTHERN PINE	NC	28387

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125201**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1160 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN W MOTTER**

Mailing Address 590 CENTRAL DR

City	State	Zip Code
SOUTHERN PINE	NC	28387

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.125202**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERESA MOULTON**

Mailing Address 619 E FRANKLIN ST

City	State	Zip Code
CHAPEL HILL	NC	27514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL JEWELRY & PAWN INC.

Occupation  
CLERICAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125204**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SENIZ MOUSHEY**

Mailing Address 148 SIDNEY BAY DR.

City	State	Zip Code
NEWPORT BEACH	CA	92657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125206**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1161 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GALA H MOWAT**

Mailing Address **4 PALA AVE**

City	State	Zip Code
PIEDMONT	CA	94611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125208**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARIAN E MOYER**

Mailing Address **6322 PILGRIM RD**

City	State	Zip Code
MADISON	WI	53711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125210**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HERBERT J MUELLER**

Mailing Address **P.O. BOX 847**

City	State	Zip Code
BETHANY BEACH	DE	19930

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125211**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1162 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JIM MUELLER**

Mailing Address 4349 BUCHANAN ROAD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MUELLER LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125213**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIM MUELLER**

Mailing Address 4349 BUCHANAN ROAD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MUELLER LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128697**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDITH MUELLER**

Mailing Address 4125 SANDY DRIVE

City	State	Zip Code
MERRILL	WI	54452

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125215**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1163 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**KATHRYN A MUELLER**

Mailing Address **PO BOX 96**

City State Zip Code  
**FOX LAKE WI 53933**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125217**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MARY JO MUELLER**

Mailing Address **4349 BUCHANAN ROAD**

City State Zip Code  
**OCONOMOWOC WI 53066**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**270.00**

**Transaction ID : SA17A.128699**

Date of Receipt

**07 / 07 / 2015**

**REATTRIBUTED**

Amount of Each Receipt this Period

**270.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DONALD P MUENCH**

Mailing Address **19070B STONEHEDGE DRIVE**

City State Zip Code  
**BROOKFIELD WI 53045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125219**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**500.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1164 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RITA MULDROW**

Mailing Address 1602 E CRYSTAL PL

City	State	Zip Code
BROWNFIELD	TX	79316

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.125221**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

253.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAXINE B MULLEADY**

Mailing Address PO BOX 679

City	State	Zip Code
MINOQUCA	WI	54548

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125223**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

350.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEOFFREY MULLER**

Mailing Address PO BOX 420848

City	State	Zip Code
SUMMERLAND KEY	FL	33042

FEC ID number of contributing federal political committee.

C

Name of Employer  
NONE

Occupation  
NONE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125225**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1103.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1165 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK MULLER**

Mailing Address 6001 NW COUNTY RD 12

City	State	Zip Code
AMORET	MO	64722

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125227**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUE MUNDY**

Mailing Address PO BOX 2198

City	State	Zip Code
SUGAR LAND	TX	77487

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125229**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT B MURCH**

Mailing Address 10451 SPERRY ROAD

City	State	Zip Code
KIRTLAND	OH	44094

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125231**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1166 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JERRY W MURDOCK**

Mailing Address P.O. BOX 2009

City

FOUNTAIN INN

State

SC

Zip Code

29644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IPS PACKAGING

Occupation

CEO

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125233**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERRY C MURFF**

Mailing Address 8221 OLD SPRINGFIELD

City

GOODLETTSVILL

State

TN

Zip Code

37072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOGOZ INC.

Occupation

SALESMAN

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125235**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DIANE MURPHREY**

Mailing Address 3987 MOYE TURNAGE RD

City

FARMVILLE

State

NC

Zip Code

27828

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COPY PRO INC.

Occupation

SELF-EMPLOYED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125237**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1167 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANN M MURPHY**

Mailing Address 1525 RUSTIC WAY

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing federal political committee.

C

Name of Employer  
MURPHY DEVELOPMENT

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125239**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANTHONY MURPHY**

Mailing Address 4005 MADISON STREET

City	State	Zip Code
HYATTSVILLE	MD	20781

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125241**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES E MURPHY**

Mailing Address 2101 ROSSLYN CHAPEL CT

City	State	Zip Code
ARLINGTON	TX	76012

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125243**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1168 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE MURPHY**

Mailing Address 1153 HEDGEROW DR

City	State	Zip Code
GARNET VALLEY	PA	19060

FEC ID number of contributing federal political committee.

C

Name of Employer  
LINCOLN FINANCIAL GROUP

Occupation  
HR MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125245**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREGORY MURPHY**

Mailing Address 6 STRONG PL

City	State	Zip Code
BROOKLYN	NY	11231

FEC ID number of contributing federal political committee.

C

Name of Employer  
SKANSKA

Occupation  
CONSTRUCTION MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.125247**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANET K MURPHY**

Mailing Address 424 E LINDBERGH

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125249**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1169 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JEROME R MURPHY**

Mailing Address 9 SPRINGBROOK CERCLE DR

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125251**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PAUL MURPHY**

Mailing Address 55 OLD VERMONT PLACE

City	State	Zip Code
ATLANTA	GA	30328

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
E KING & SPALDING LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125253**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			09			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD & ROXANN MURPHY**

Mailing Address 804 AUBURN LAKES CIRCLE

City	State	Zip Code
VENICE	FL	34292

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125255**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			22			2015			

Amount of Each Receipt this Period

400.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1150.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1170 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERENCE MURPHY**

Mailing Address 5606 NETHERLAND CT.

City	State	Zip Code
DALLAS	TX	75229

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125257**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIM MURPHY**

Mailing Address 1739 LAUREL GLEN PLACE

City	State	Zip Code
LAKELAND	FL	33803

FEC ID number of contributing federal political committee.

C

Name of Employer  
NORTRAX INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125259**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TINA MUSBACH**

Mailing Address W334N5832 GARVIN LANE

City	State	Zip Code
NASHOTAH	WI	53058

FEC ID number of contributing federal political committee.

C

Name of Employer  
STROHWIG INDUSTRIES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125261**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1171 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ELLEN MUSSER**

Mailing Address **233 MCHENRY RD**

City	State	Zip Code
INDIANA	PA	15701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125263**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS MUSSONI**

Mailing Address **115 FAIRWIND COURT**

City	State	Zip Code
FORT MILL	SC	29708

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COMMERCIAL PROPERTY ADVISORS**

Occupation  
**PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125265**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NANCY MUTH**

Mailing Address **11100 BEACH BOULEVARD, PO BOX E**

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128704**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2015

REATTRIBUTED

Amount of Each Receipt this Period

**5400.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1250.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1172 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY MUTH**

Mailing Address 11100 BEACH BOULEVARD, PO BOX E

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128705**

Date of Receipt

**07 / 07 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY MUTH**

Mailing Address 11100 BEACH BOULEVARD, PO BOX E

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128706**

Date of Receipt

**07 / 07 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICK MUTH**

Mailing Address 11100 BEACH BOULEVARD, PO BOX E

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ORCO BLOCK COMPANY

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.125267**

Date of Receipt

**07 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1173 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICK MUTH**

Mailing Address 11100 BEACH BOULEVARD, PO BOX E

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ORCO BLOCK COMPANY**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128700**

Date of Receipt

**07 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICK MUTH**

Mailing Address 11100 BEACH BOULEVARD, PO BOX E

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ORCO BLOCK COMPANY**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128701**

Date of Receipt

**07 / 07 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICK MUTH**

Mailing Address 11100 BEACH BOULEVARD, PO BOX E

City	State	Zip Code
STANTON	CA	90680

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ORCO BLOCK COMPANY**

Occupation  
**PRESIDENT**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128702**

Date of Receipt

**07 / 07 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1174 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**VINCENT MUZZI**

Mailing Address **360 ELDER AVE**

City	State	Zip Code
<b>MILLBRAE</b>	<b>CA</b>	<b>94030</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MAGNOLIA OF MILLBRAE**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125269**

Date of Receipt

**07 / 06 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID MYERS**

Mailing Address **16065 A. E. MULLINIX RO**

City	State	Zip Code
<b>WOODBINE</b>	<b>MD</b>	<b>21797</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125271**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**F. B MYERS**

Mailing Address **100 BRANDON PL**

City	State	Zip Code
<b>WINSTON SALEM</b>	<b>NC</b>	<b>27104</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SALEM ELECTRIC**

Occupation  
**ELECTRICAL CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125273**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2300.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1175 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAYE MYHRE**

Mailing Address **4156 BRYNWOOD DRIVE**

City	State	Zip Code
NAPLES	FL	34119

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125275**

Date of Receipt

**08 / 21 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAYE MYHRE**

Mailing Address **4156 BRYNWOOD DRIVE**

City	State	Zip Code
NAPLES	FL	34119

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128850**

Date of Receipt

**08 / 21 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TERRY MYHRE**

Mailing Address **4156 BRYNWOOD DRIVE**

City	State	Zip Code
NAPLES	FL	34119

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128852**

Date of Receipt

**08 / 21 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1176 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FARA NADAL**

Mailing Address **4490 GLEN KERNAN PKWY.**

City	State	Zip Code
JACKSONVILLE	FL	32224

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BAPTIST PRIMARY CARE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125277**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY NADAWER**

Mailing Address **12107 GREENLEAF AVENUE**

City	State	Zip Code
POTOMAC	MD	20854

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125279**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRUCE NADEAU**

Mailing Address **4943 PARK RD APT 613**

City	State	Zip Code
CHARLOTTE	NC	28209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**V-STAX, LLC**

Occupation  
**TECHNOLOGY DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125281**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1177 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELLIS O NAEGELE**

Mailing Address 7993 VIA VECHHIA

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125283**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT NAEGELE**

Mailing Address 7993 VIA VECCHIA

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125285**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BOB NAGEL**

Mailing Address E10281 HIGHWAY 33

City	State	Zip Code
BARABOO	WI	53913

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125287**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1178 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. W NALL**

Mailing Address **119 EUCLID AVENUE**

City	State	Zip Code
<b>BIRMINGHAM</b>	<b>AL</b>	<b>35213</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NALL DEVELOPMENT CORP**

Occupation  
**REAL ESTATE DEVELOPER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125289**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAX NALL**

Mailing Address **32 W CEDAR AVE**

City	State	Zip Code
<b>SAINT LOUIS</b>	<b>MO</b>	<b>63119</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**M2 ARCHITECT**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125291**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAX NALL**

Mailing Address **32 W CEDAR AVE**

City	State	Zip Code
<b>SAINT LOUIS</b>	<b>MO</b>	<b>63119</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**M2 ARCHITECT**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**260.00**

**Transaction ID : SA17A.125292**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**10.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**510.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1179 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES NAPIER**

Mailing Address 2640 INDIAN HILL DRIVE

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125294**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DUANE NAQUIN**

Mailing Address 112 WOODCOCK TRAIL

City	State	Zip Code
WEST COLUMBIA	SC	29169

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STONE INTERIORS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125296**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN M NASSEFF**

Mailing Address 59 4TH STREET W, APT 24

City	State	Zip Code
ST PAUL	MN	55102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.125298**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

11550.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1180 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M NASSEFF**

Mailing Address **59 4TH STREET W, APT 24**

City	State	Zip Code
ST PAUL	MN	55102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125298.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

REATTRIBUTION TO HELENE HOULE

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HELENE A HOULE**

Mailing Address **59 4TH ST W APT 24B**

City	State	Zip Code
SAINT PAUL	MN	55102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125298.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

REATTRIBUTION FROM JOHN NASSEFF; SEE  
REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HELENE A HOULE**

Mailing Address **59 4TH ST W APT 24B**

City	State	Zip Code
SAINT PAUL	MN	55102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125298.2**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1181 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HELENE A HOULE**

Mailing Address 59 4TH ST W APT 24B

City	State	Zip Code
SAINT PAUL	MN	55102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125298.3**

Date of Receipt

**08 / 20 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/25/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN M NASSEFF**

Mailing Address 59 4TH STREET W, APT 24

City	State	Zip Code
ST PAUL	MN	55102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125298.4**

Date of Receipt

**08 / 20 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN M NASSEFF**

Mailing Address 59 4TH STREET W, APT 24

City	State	Zip Code
ST PAUL	MN	55102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125298.5**

Date of Receipt

**08 / 20 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1182 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**STEVE NASSEFF**

Mailing Address **844 DORWIN RD**

City State Zip Code  
**HUDSON WI 54016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NASSEFF MECHANICAL CONTRACTORS**

Occupation  
**PROJECT MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5000.00**

**Transaction ID : SA17A.125303**

Date of Receipt

**08 / 20 / 2015**

REATTRIBUTION REQUESTED

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**STEVE NASSEFF**

Mailing Address **844 DORWIN RD**

City State Zip Code  
**HUDSON WI 54016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NASSEFF MECHANICAL CONTRACTORS**

Occupation  
**PROJECT MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125303.0**

Date of Receipt

**08 / 20 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

**-2300.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STEVE NASSEFF**

Mailing Address **844 DORWIN RD**

City State Zip Code  
**HUDSON WI 54016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NASSEFF MECHANICAL CONTRACTORS**

Occupation  
**PROJECT MANAGER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5000.00**

**Transaction ID : SA17A.125303.1**

Date of Receipt

**08 / 20 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/10/2015

Amount of Each Receipt this Period

**2300.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1183 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TAWNEE NASSEFF**

Mailing Address 3657 SUNBURY DR

City	State	Zip Code
WOODBURY	MN	55125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PAIGE J DONNELLY LTD**

Occupation  
**IN-HOUSE ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125305**

Date of Receipt

**08 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TAWNEE NASSEFF**

Mailing Address 3657 SUNBURY DR

City	State	Zip Code
WOODBURY	MN	55125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PAIGE J DONNELLY LTD**

Occupation  
**IN-HOUSE ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125305.0**

Date of Receipt

**08 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONNY NASSEFF**

Mailing Address 3657 SUNBURY DR

City	State	Zip Code
WOODBURY	MN	55125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125305.1**

Date of Receipt

**08 / 20 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1184 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARSHA NATION**

Mailing Address 5901 N DOBBS RD

City	State	Zip Code
HARRAH	OK	73045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125307**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY NATROP**

Mailing Address 619 N 72ND ST

City	State	Zip Code
WAUWATOSA	WI	53213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RENNER 414720213653ARCHITECTS**

Occupation  
**ARCHITECT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125309**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES NAVIN**

Mailing Address 6343 WALBRANDT RD

City	State	Zip Code
BURLINGTON	WI	53105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SPEE-DEE PACKAGING**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125311**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1185 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL NEAL**

Mailing Address 7516 BLUEGRASS BLVD

City	State	Zip Code
FABIUS	NY	13063

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125313**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL NEAL**

Mailing Address 7516 BLUEGRASS BLVD

City	State	Zip Code
FABIUS	NY	13063

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125314**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEAN NEDVIDEK**

Mailing Address N8538 O THOMPSON RD

City	State	Zip Code
HOLMEN	WI	54636

FEC ID number of contributing federal political committee.

C

Name of Employer  
MODERN CRANE SERVICE

Occupation  
UNION LABORER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.125316**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1186 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEAN NEDVIDEK**

Mailing Address **N8538 O THOMPSON RD**

City	State	Zip Code
HOLMEN	WI	54636

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MODORN CRANE SERVICE**

Occupation  
**UNION LABORER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**303.00**

**Transaction ID : SA17A.125317**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD NEFF**

Mailing Address **5807 VAN ALLEN WAY**

City	State	Zip Code
CARLSBAD	CA	92008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SMAC CORP**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125319**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEVIN P NEHLS**

Mailing Address **W4774 OAK HILL RD**

City	State	Zip Code
WATERTOWN	WI	53098

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125321**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1187 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD NEISS**

Mailing Address 200 CHARTER OAK DR

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125323**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD NEISS**

Mailing Address 200 CHARTER OAK DR

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125324**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE NELLESSEN**

Mailing Address 4654 RUBY AVENUE

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MEDISERVE, INC.

Occupation  
MANAGING DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125326**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

600.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1188 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRUCE NELSON**

Mailing Address 7065 BROOKVIEW DR

City	State	Zip Code
URBANDALE	IA	50322

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125327**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ERIC NELSON**

Mailing Address 11479 BRONZEDALE DRIVE

City	State	Zip Code
OAKTON	VA	22124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125331**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GRANT NELSON**

Mailing Address 20860 GEORGE HUNT CI

City	State	Zip Code
WAUKESHA	WI	53186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.125333**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

425.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1189 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GRANT E NELSON**

Mailing Address **W11410 453RD AVENUE**

City

**PRESCOTT**

State

**WI**

Zip Code

**54021**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**10800.00**

**Transaction ID : SA17A.125335**

Date of Receipt

**08 / 19 / 2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

**10800.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GRANT E NELSON**

Mailing Address **W11410 453RD AVENUE**

City

**PRESCOTT**

State

**WI**

Zip Code

**54021**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125335.0**

Date of Receipt

**08 / 19 / 2015**

REATTRIBUTION TO CAROL NELSON

Amount of Each Receipt this Period

**-5400.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL J NELSON**

Mailing Address **W11410 453RD AVENUE**

City

**PRESCOTT**

State

**WI**

Zip Code

**54021**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125335.1**

Date of Receipt

**08 / 19 / 2015**

REATTRIBUTION FROM GRANT NELSON; SEE  
REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**10800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1190 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL J NELSON**

Mailing Address **W11410 453RD AVENUE**

City <b>PRESCOTT</b>	State <b>WI</b>	Zip Code <b>54021</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125335.2**

Date of Receipt

**08 / 19 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL J NELSON**

Mailing Address **W11410 453RD AVENUE**

City <b>PRESCOTT</b>	State <b>WI</b>	Zip Code <b>54021</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125335.3**

Date of Receipt

**08 / 19 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/31/2015**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GRANT E NELSON**

Mailing Address **W11410 453RD AVENUE**

City <b>PRESCOTT</b>	State <b>WI</b>	Zip Code <b>54021</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125335.4**

Date of Receipt

**08 / 19 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**0.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1191 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GRANT E NELSON**

Mailing Address **W11410 453RD AVENUE**

City <b>PRESCOTT</b>	State <b>WI</b>	Zip Code <b>54021</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125335.5**

Date of Receipt

**08 / 19 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON 12/31/2015**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL NELSON**

Mailing Address **437 BEACH 133RD ST**

City <b>BELLE HARBOR</b>	State <b>NY</b>	Zip Code <b>11694</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125340**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**R E NELSON**

Mailing Address **3699 MACQUEEN CT**

City <b>FAYETTEVILLE</b>	State <b>NC</b>	Zip Code <b>28314</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RESTAURANTURE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125342**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**550.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1192 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHARI NELSON**

Mailing Address 835 COUNTY ROAD H

U

City

WISCONSIN DEL

State

WI

Zip Code

53965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KALAHARI DEVELOPMENT LL

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125344**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

12

2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TODD R NELSON**

Mailing Address 835 COUNTY ROAD H UNIT

City

WISCONSIN DEL

State

WI

Zip Code

53965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KALAHARI DEVELOPMENT LL

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125346**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

12

2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TODD R NELSON**

Mailing Address 835 COUNTY ROAD H UNIT

City

WISCONSIN DEL

State

WI

Zip Code

53965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KALAHARI DEVELOPMENT LL

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125347**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

12

2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1193 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM NELSON**

Mailing Address P.O. BOX 217

City	State	Zip Code
STONE LAKE	WI	54876

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125349**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM NELSON**

Mailing Address P.O. BOX 217

City	State	Zip Code
STONE LAKE	WI	54876

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.125350**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY M NESHEK**

Mailing Address 1335 GENEVA NATIONAL

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125352**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1194 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MIRIAM NESTLER**

Mailing Address 6701 SW SCATHELOCK RD

City	State	Zip Code
TOPEKA	KS	66614

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125353**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BERNIE A NEVIASER**

Mailing Address 9017 ROYAL OAKS CIR

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

C

Name of Employer  
NEVIASER INVESTMENTS INC

Occupation  
MANAGING PARTNER HOTELS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125355**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERNADET NEVOLA**

Mailing Address 10 PALMER LN

City	State	Zip Code
THORNWOOD	NY	10594

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125357**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1195 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J CHESTON M NEWBOLD**

Mailing Address 227 DINGLETON HILL RD

City	State	Zip Code
CORNISH	NH	03745

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125359**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIMOTHY NEWHOLM**

Mailing Address 3812 S. BROOK PL

City	State	Zip Code
SAINT FRANCIS	WI	53235

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BOYLE FREDRICKSON

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125361**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KRISTIN NEWHOUSE**

Mailing Address 811 MONITOR STREET, SUITE 100

City	State	Zip Code
LA CROSSE	WI	54603

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125363**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1196 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**KRISTIN NEWHOUSE**

Mailing Address **811 MONITOR STREET, SUITE 100**

City <b>LA CROSSE</b>	State <b>WI</b>	Zip Code <b>54603</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125364**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KRISTIN NEWHOUSE**

Mailing Address **811 MONITOR STREET, SUITE 100**

City <b>LA CROSSE</b>	State <b>WI</b>	Zip Code <b>54603</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125365**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/10/2015

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARY NEWTON**

Mailing Address **607 E TAYLOR RUN PKW**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125369**

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**300.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1197 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**PETER NEWTON**

Mailing Address 2928 CRYDER WAY

City	State	Zip Code
YORKVILLE	IL	60560

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NEAL, GERBER & EISENBERG, LLP**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125371**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EVA MICH NGUYEN**

Mailing Address 211 HAYDEN LN

City	State	Zip Code
NEWNAN	GA	30265

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SOUTHWEST CHRISTIAN CARE**

Occupation  
**RN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125373**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NGAI NGUYEN**

Mailing Address 696 EAST SANTA CLARA ST

1

City	State	Zip Code
SAN JOSE	CA	95112

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125374**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

850.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1198 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JONH NICEWONDER**

Mailing Address **148 BRISTOL E RD**

City <b>BRISTOL</b>	State <b>VA</b>	Zip Code <b>24202</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE NICEWONDER GROUP**

Occupation  
**BUSINESSMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125376**

Date of Receipt

M M / D D / Y Y Y Y
06 / 18 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PHYLLIS NICHOLAS**

Mailing Address **40 HOWARD ROAD**

City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125377**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PHYLLIS NICHOLAS**

Mailing Address **40 HOWARD ROAD**

City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.125378**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**700.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1199 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS J NICHOLS**

Mailing Address 14555 JUNEAU BLVD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

C

Name of Employer  
**MEISSNER TIERNEY FISHER & NI**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125380**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM NICHOLS**

Mailing Address 304 PHEASANT RUN DR

City	State	Zip Code
DANVILLE	CA	94506

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125382**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**D.J. NICHOLSON**

Mailing Address 3400 BARROW ISLAND RD

City	State	Zip Code
JUPTIER	FL	33477

FEC ID number of contributing federal political committee.

C

Name of Employer  
**YORK MANAGEMENT**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125384**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

9100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1200 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**D.J. NICHOLSON**

Mailing Address 3400 BARROW ISLAND RD

City	State	Zip Code
JUPTIER	FL	33477

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
YORK MANAGEMENT

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128880**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**D.J. NICHOLSON**

Mailing Address 3400 BARROW ISLAND RD

City	State	Zip Code
JUPTIER	FL	33477

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
YORK MANAGEMENT

Occupation  
CHAIRMAN

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128881**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID NICHOLSON**

Mailing Address 1 MARTIN PLACE

City	State	Zip Code
GROSSE POINTE	MI	48230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PVS CHEMICALS, INC

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129134**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1201 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID NICHOLSON**

Mailing Address **1 MARTIN PLACE**

City	State	Zip Code
GROSSE POINTE	MI	48230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PVS CHEMICALS, INC**

Occupation  
**VP**

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.129134.0**

Date of Receipt

**09 / 18 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID NICHOLSON**

Mailing Address **1 MARTIN PLACE**

City	State	Zip Code
GROSSE POINTE	MI	48230

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PVS CHEMICALS, INC**

Occupation  
**VP**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.129134.1**

Date of Receipt

**09 / 18 / 2015**

**REDESIGNATION FROM PRIMARY; TO BE REFUNDED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BUB NICKEL**

Mailing Address **10685B HAZELHURST DRIVE**

City	State	Zip Code
HOUSTON	TX	77043

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125386**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1202 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STUART C NICKERSON**

Mailing Address 2503 HUTCHINSON COURT

City	State	Zip Code
BURLINGTON	NC	27215

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125388**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STUART C NICKERSON**

Mailing Address 2503 HUTCHINSON COURT

City	State	Zip Code
BURLINGTON	NC	27215

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125389**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAMILLE NICKLAUS**

Mailing Address 7815 VOLKMAN STREET

City	State	Zip Code
ROTHSCHILD	WI	54474

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125391**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1203 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELLEN NICKLAUS**

Mailing Address **N5127 WALSH RD**

City	State	Zip Code
IRMA	WI	54442

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125393**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELLEN NICKLAUS**

Mailing Address **N5127 WALSH RD**

City	State	Zip Code
IRMA	WI	54442

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125394**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RONALD H NICKLAUS**

Mailing Address **N5127 WALSH RD**

City	State	Zip Code
IRMA	WI	54442

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125396**

Date of Receipt

**08 / 03 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1204 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TODD NICKLAUS**

Mailing Address **7815 VOLKMAN STREET**

City	State	Zip Code
ROTHSCHILD	WI	54474

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RIVER VALLEY BANK**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125398**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RON NICOL**

Mailing Address **6897 MEMORIAL DRIVE**

City	State	Zip Code
FRISCO	TX	75034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BOSTON CONSULTING GROUP**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125400**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RON NICOL**

Mailing Address **6897 MEMORIAL DRIVE**

City	State	Zip Code
FRISCO	TX	75034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BOSTON CONSULTING GROUP**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125400.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**8100.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1205 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LIANE NICOL**

Mailing Address **6897 MEMORIAL DR**

City <b>FRISCO</b>	State <b>TX</b>	Zip Code <b>75034</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ELECTROSOFT, INC.**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125400.1**

Date of Receipt

**06 / 19 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL F NIKOLAI**

Mailing Address **E2358 ROCKY HILL LN**

City <b>WAUPACA</b>	State <b>WI</b>	Zip Code <b>54981</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WAUPACA FOUNDRY**

Occupation  
**PRESIDENT/COO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125402**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZABET NIMMO**

Mailing Address **28402 TEAL CT**

City <b>MAGNOLIA</b>	State <b>TX</b>	Zip Code <b>77355</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**253.00**

**Transaction ID : SA17A.125404**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**253.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**753.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1206 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOEL NINNEMAN**

Mailing Address 1000 VISTA RIDGE DRIVE

City	State	Zip Code
MOUNT HOREB	WI	53572

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CDW

Occupation  
PROJECT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125406**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY NOARD**

Mailing Address N74W15970 STONEWOOD

City	State	Zip Code
MENOMONEE FAL	WI	53051

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PREMIER AGENCY WEALTH  
MANAGEMENT

Occupation  
INVESTMENT CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125408**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT NOCEK**

Mailing Address 13 PAMRAPO CT E

City	State	Zip Code
GLEN ROCK	NJ	07452

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125410**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1207 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LYNN NOFZIGER**

Mailing Address 4001 EDWARD DRIVE

City	State	Zip Code
BRUNSWICK	OH	44212

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125412**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ILENE NOLTE**

Mailing Address 406 CARRIAGE LN

City	State	Zip Code
WYCKOFF	NJ	07481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125414**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ILENE NOLTE**

Mailing Address 406 CARRIAGE LN

City	State	Zip Code
WYCKOFF	NJ	07481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125415**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1208 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ILENE NOLTE**

Mailing Address 406 CARRIAGE LN

City State Zip Code  
WYCKOFF NJ 07481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125416**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAYMOND NOLTE**

Mailing Address 406 CARRIAGE LN

City State Zip Code  
WYCKOFF NJ 07481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.125418**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYMOND NOLTE**

Mailing Address 406 CARRIAGE LN

City State Zip Code  
WYCKOFF NJ 07481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125419**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1209 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RAYMOND NOLTE**

Mailing Address 406 CARRIAGE LN

City State Zip Code  
WYCKOFF NJ 07481

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125420**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RAYMOND NOLTE**

Mailing Address 406 CARRIAGE LN

City State Zip Code  
WYCKOFF NJ 07481

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125421**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**REBECCA NOLTE**

Mailing Address 4103 S BURRELL ST

City State Zip Code  
MILWAUKEE WI 53207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
W.B. BOTTLE SUPPLY CO.

Occupation  
FACTORY WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125422**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

50.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1210 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REBECCA NOLTE**

Mailing Address 4103 S BURRELL ST

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
W.B. BOTTLE SUPPLY CO.

Occupation  
FACTORY WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125423**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**REBECCA NOLTE**

Mailing Address 4103 S BURRELL ST

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
W.B. BOTTLE SUPPLY CO.

Occupation  
FACTORY WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125424**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REBECCA NOLTE**

Mailing Address 4103 S BURRELL ST

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
W.B. BOTTLE SUPPLY CO.

Occupation  
FACTORY WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125425**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1211 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REBECCA NOLTE**

Mailing Address 4103 S BURRELL ST

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
W.B. BOTTLE SUPPLY CO.

Occupation  
FACTORY WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.125426**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**REBECCA NOLTE**

Mailing Address 4103 S BURRELL ST

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
W.B. BOTTLE SUPPLY CO.

Occupation  
FACTORY WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125427**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN J NOOYEN**

Mailing Address 1171 DREWS DR

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOME INSTEAD SENIOR CARE 149

Occupation  
FRANCHISE OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125429**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1212 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY NORD**

Mailing Address 700 NEW HAMPSHIRE, NW

City	State	Zip Code
WASHINGTON	DC	20037

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125431**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			21			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAYBURN NORLING**

Mailing Address PO BOX 753

City	State	Zip Code
WILLMAR	MN	56201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LIFE SCIENCE INNOVATIONS

Occupation  
BUSINESS MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125433**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			23			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RALPH NORMAN**

Mailing Address PO BOX 36518

City	State	Zip Code
ROCK HILL	SC	29732

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SOUTH CAROLINA HOUSE OF REPR

Occupation  
REPUBLICAN MEMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125435**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1213 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**H. C NORRIS**

Mailing Address 5700 W BENDER CT

City	State	Zip Code
MILWAUKEE	WI	53218

FEC ID number of contributing federal political committee.

C

Name of Employer  
COLUMBIAN ART WORKS INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.125437**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GUY NORTHCUTT**

Mailing Address 505 WOODVALLEY DR SW

City	State	Zip Code
MARIETTA	GA	30064

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125438**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GUY NORTHCUTT**

Mailing Address 505 WOODVALLEY DR SW

City	State	Zip Code
MARIETTA	GA	30064

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125439**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1214 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENNIFER NORTHOUSE**

Mailing Address 726 W. ROCK PLACE

City	State	Zip Code
GLENDALE	WI	53209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NORTHSTONE, INC.

Occupation  
EXECUTIVE RECRUITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125441**

Date of Receipt

**07** / **09** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEN NORTON**

Mailing Address 10 ANDOVER ST

City	State	Zip Code
PELHAM	NH	03076

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RAYTHEON COMPANY

Occupation  
SYSTEMS ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125443**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LISA NOVACEK**

Mailing Address 7103

City	State	Zip Code
IRVING	TX	75039

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
FINANCIAL SERVICES CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

**Transaction ID : SA17A.125445**

Date of Receipt

**07** / **16** / **2015**

Amount of Each Receipt this Period

1050.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1215 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICH & KATIE NOVCASKI**

Mailing Address 3201 MERGANSER AVE

City	State	Zip Code
ANCHORAGE	AK	99516

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125447**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLADYS NOVOTNY**

Mailing Address 397 E CHURCH ST.

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125449**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SARAH NOZINKSY**

Mailing Address 54 HARDING AVENUE

City	State	Zip Code
BUFFALO	NY	14217

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125450**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1216 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANE NULTY**

Mailing Address 212 WINROW DRIVE

City	State	Zip Code
JAMESTOWN	NC	27282

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125452**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MRS. LES C NUNNALLY**

Mailing Address 5538 JESSAMINE LN

City	State	Zip Code
ORLANDO	FL	32839

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.125454**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

225.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STANLEY NUSBAUM**

Mailing Address 7126 SARATOGA LANE

City	State	Zip Code
CHATTANOOGA,	TN	37421

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

236.00

**Transaction ID : SA17A.125455**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1325.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1217 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BILL NYBORG**

Mailing Address 46 SUNNYGROVE DR.

City	State	Zip Code
ODESSA	TX	79761

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SOUTHWESTERN MACHINE**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125457**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRANCIS NYE**

Mailing Address 10500 ACADEMY RD, NE, APT 212

City	State	Zip Code
ALBUQUERQUE	NM	87111

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125459**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANCIS NYE**

Mailing Address 10500 ACADEMY RD, NE, APT 212

City	State	Zip Code
ALBUQUERQUE	NM	87111

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125460**

Date of Receipt

**08 / 19 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1218 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL O'BERRY**

Mailing Address 10159 N 119TH PL

City	State	Zip Code
SCOTTSDALE	AZ	85259

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125462**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARL O'BERRY**

Mailing Address 10159 N 119TH PL

City	State	Zip Code
SCOTTSDALE	AZ	85259

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.125463**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BETTY O'BRIEN**

Mailing Address 60 MURRAY BLVD.

City	State	Zip Code
CHARLESTON	SC	29401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125464**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1219 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. SCOTT O'BRIEN**

Mailing Address 115 TUTTLE ROAD

City	State	Zip Code
SAN ANTONIO	TX	78209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125605**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**J. SCOTT O'BRIEN**

Mailing Address 115 TUTTLE ROAD

City	State	Zip Code
SAN ANTONIO	TX	78209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125605.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDA O'BRIEN**

Mailing Address 115 TUTTLE RD

City	State	Zip Code
SAN ANTONIO	TX	78209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125605.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1220 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD O'BRIEN**

Mailing Address PO BOX 698

247 MORGANS RUN

City

WHITE STONE

State

VA

Zip Code

22578

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125466**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN O'DONNELL**

Mailing Address 567 SAN NICOLAS DR

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

THE O'DONNELL GROUP

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

**Transaction ID : SA17A.125468**

Date of Receipt

**07** / **06** / **2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN O'DONNELL**

Mailing Address 567 SAN NICOLAS DR

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

THE O'DONNELL GROUP

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.125469**

Date of Receipt

**07** / **06** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1221 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN O'DONNELL**

Mailing Address 567 SAN NICOLAS DR

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE O'DONNELL GROUP**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125470**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN O'DONNELL**

Mailing Address 567 SAN NICOLAS DR

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE O'DONNELL GROUP**

Occupation  
**CEO**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125471**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

REDESIGNATION

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA O'DONNELL**

Mailing Address 562 SAN NICHOLAS DRI

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.125473**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

5000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1222 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA O'DONNELL**

Mailing Address 562 SAN NICHOLAS DRI

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125474**

Date of Receipt

**07 / 06 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICIA O'DONNELL**

Mailing Address 562 SAN NICHOLAS DRI

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.125475**

Date of Receipt

**07 / 06 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LEO A O'HEARN**

Mailing Address 3700 KETCH AVENUE 106

City	State	Zip Code
OXNARD	CA	93035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.125477**

Date of Receipt

**08 / 14 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1223 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LEO A O'HEARN**

Mailing Address 3700 KETCH AVENUE 106

City	State	Zip Code
OXNARD	CA	93035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125478**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEO A O'HEARN**

Mailing Address 3700 KETCH AVENUE 106

City	State	Zip Code
OXNARD	CA	93035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.125479**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICK F O'LEARY**

Mailing Address 1015 MADISON AVE

City	State	Zip Code
NEW YORK	NY	10075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOSPITAL FOR SPECIAL SURGERY**

Occupation  
**ORTHOPEDIC SURGEON**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125481**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1224 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD M O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LOOKING GLASS INVESTMENTS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125559**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD M O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LOOKING GLASS INVESTMENTS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.125560**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD M O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LOOKING GLASS INVESTMENTS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125560.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1225 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENNIE O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125560.1**

Date of Receipt

**07 / 11 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD M O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LOOKING GLASS INVESTMENTS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4400.00

**Transaction ID : SA17A.125483**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

1700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD M O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City	State	Zip Code
BAYSIDE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LOOKING GLASS INVESTMENTS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125483.0**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-1700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1226 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JENNIE O'MALLEY**

Mailing Address 1041 E RAVINE LANE

City State Zip Code  
BAYSIDE WI 53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2200.00

**Transaction ID : SA17A.125483.1**

Date of Receipt

M M / D D / Y Y Y Y  
08 18 2015

REATTRIBUTED

Amount of Each Receipt this Period

1700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TIMOTHY S O'MALLEY**

Mailing Address W286 N3111 LAKESIDE DRI

City State Zip Code  
PEWAUKEE WI 53072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125485**

Date of Receipt

M M / D D / Y Y Y Y  
09 11 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KRISTINE K O'MEARA**

Mailing Address 652 S 8TH AVE

City State Zip Code  
WEST BEND WI 53095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TOOMAVARA PARTNERS, LLC

Occupation  
REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125487**

Date of Receipt

M M / D D / Y Y Y Y  
07 20 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1227 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BEVERLY H OASHGAR**

Mailing Address 306 N SEGOE RD

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125488**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VIRGINIA OATES**

Mailing Address 3867 OLYMPIA DR

City	State	Zip Code
HOUSTON	TX	77019

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125490**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER OATWAY**

Mailing Address 6251 PARK ROAD

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

C

Name of Employer  
VERIZON

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125492**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		04		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1228 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BONNIE A OBERNBERGE**

Mailing Address 5927 QUAKER HILL RD

City	State	Zip Code
MOUNT PLEASAN	WI	53406

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125494**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID J OBERNBERGE**

Mailing Address 5927 QUAKER HILL RD

City	State	Zip Code
MOUNT PLEASAN	WI	53406

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125496**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM OBERWEIS**

Mailing Address 3 BUCKINGHAM DR

City	State	Zip Code
SUGAR GROVE	IL	60554

FEC ID number of contributing federal political committee.

C

Name of Employer  
STATE OF ILLINOIS 25TH DISTR

Occupation  
SENATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.125497**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1229 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS OCHEL TREE**

Mailing Address 9 KILBORN

City	State	Zip Code
BLOOMINGTON	IL	61704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ORAL SURGEON**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.125498**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

125.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RALPH ODYA**

Mailing Address 2245 W VOGEL AVE

City	State	Zip Code
MILWAUKEE	WI	53221

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MR.RALPH J ODYA**

Occupation  
**FAMILY NURSE PRACTITIONER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125499**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NOBERT OEHL**

Mailing Address 756 S ORLANDO AVE APT 111

City	State	Zip Code
COCOA BEACH	FL	32931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125501**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

475.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1230 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH OERKE**

Mailing Address 16208 NE 162ND ST.

City	State	Zip Code
KEARNEY	MO	64060

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125503**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRUCE OESTER**

Mailing Address 13817 NE 93RD ST

City	State	Zip Code
VANCOUVER	WA	98682

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.125505**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER OGDEN**

Mailing Address W290 N2171 HAPPY HOLLOW RD

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

C

Name of Employer  
OGDEN & COMPANY, INC.

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125507**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1231 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN OGLESBY**

Mailing Address 25265 E PARK CRESCEN

City	State	Zip Code
AURORA	CO	80016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MOBILENOW

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

301.00

**Transaction ID : SA17A.125508**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

101.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN OGLESBY**

Mailing Address 25265 E PARK CRESCEN

City	State	Zip Code
AURORA	CO	80016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MOBILENOW

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

351.00

**Transaction ID : SA17A.125509**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN OGLESBY**

Mailing Address 25265 E PARK CRESCEN

City	State	Zip Code
AURORA	CO	80016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MOBILENOW

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

401.00

**Transaction ID : SA17A.125510**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

201.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1232 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL OHAIR**

Mailing Address **W200S8609 WOODS ROAD**

City <b>MUSKETO</b>	State <b>WI</b>	Zip Code <b>53150</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125512**

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS OHARA**

Mailing Address **415 OGDEN AVE**

City <b>SUPERIOR</b>	State <b>WI</b>	Zip Code <b>54880</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIDWEST COIN CONCEPTS**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125514**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT OHLUND**

Mailing Address **3011 BRANDING IRON R**

City <b>SAN JUAN CAPI</b>	State <b>CA</b>	Zip Code <b>92675</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DUDEK**

Occupation  
**CONSULTING ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.125516**

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2015

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1233 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH OKRAY**

Mailing Address P.O. BOX 489

City	State	Zip Code
PLOVER	WI	54467

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.125518**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

REATTRIBUTED

Amount of Each Receipt this Period

2000.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICIA OKRAY**

Mailing Address P.O. BOX 489

City	State	Zip Code
PLOVER	WI	54467

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125520**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA OKRAY**

Mailing Address P.O. BOX 489

City	State	Zip Code
PLOVER	WI	54467

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4700.00

**Transaction ID : SA17A.125521**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1234 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA OKRAY**

Mailing Address P.O. BOX 489

City  
PLOVER

State Zip Code  
WI 54467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125522**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2000.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONNIE OLDHAM**

Mailing Address 2412 BROOKWOOD TRL

City  
SANFORD

State Zip Code  
NC 27330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANFORD CONTRACTORS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125524**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONNIE OLDHAM**

Mailing Address 2412 BROOKWOOD TRL

City  
SANFORD

State Zip Code  
NC 27330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANFORD CONTRACTORS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125525**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1235 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABETH OLESON**

Mailing Address 807 4TH STREET

City	State	Zip Code
KALONA	IA	52247

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125527**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABETH OLESON**

Mailing Address 807 4TH STREET

City	State	Zip Code
KALONA	IA	52247

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

**Transaction ID : SA17A.125528**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

550.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NELSON OLF**

Mailing Address 2736 MAGNOLIA WAY

City	State	Zip Code
FOREST GROVE	OR	97116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125530**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1236 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**COLLEEN OLHAUSEN**

Mailing Address 854 E MAPLE DR

City	State	Zip Code
HARTLEY	IA	51346

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125532**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JASON OLIVER**

Mailing Address 2537 MUGHO DR

City	State	Zip Code
HARKER HEIGHTS	TX	76548

FEC ID number of contributing federal political committee.

C

Name of Employer  
US ARMY

Occupation  
ARMY OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125534**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERIC OLOFSON**

Mailing Address 10433 BAINBRIDGE AVENUE

City	State	Zip Code
LOS ANGELES	CA	90024

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.125536**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1237 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SEAN OLOUGHLIN**

Mailing Address 215 EAST 24TH STREET # 823

City	State	Zip Code
NEW YORK	NY	10010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
GLOBAL BIOMECHANICAL SOLUTIONS, INC.	PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125538**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BEVERLY OLSON**

Mailing Address 20 IDLE HOUR DRIVE

City	State	Zip Code
MACON	GA	31210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
1842 INN	BED & BREAKFAST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125540**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BEVERLY OLSON**

Mailing Address 20 IDLE HOUR DRIVE

City	State	Zip Code
MACON	GA	31210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
1842 INN	BED & BREAKFAST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.125541**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1238 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES OLSON**

Mailing Address 592 CRAWFORD DRIVE

City	State	Zip Code
SUNNYVALE	CA	94087

FEC ID number of contributing federal political committee.

C

Name of Employer  
C J OLSON CHERRIES

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125542**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONNA OLSON**

Mailing Address 2205 DOVER LN

City	State	Zip Code
TYLER	TX	75703

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125543**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HOWARD OLSON**

Mailing Address 609 BRISTOL PL

City	State	Zip Code
MURRELLS INLE	SC	29576

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125545**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1239 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH OLSON**

Mailing Address **806 SUNCREST DRIVE**

City <b>NOKOMIS</b>	State <b>FL</b>	Zip Code <b>34275</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.125547**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

**220.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH OLSON**

Mailing Address **12370 KELLY SANDS WAY**

City <b>FORT MYERS</b>	State <b>FL</b>	Zip Code <b>33908</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125549**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LLOYD OLSON**

Mailing Address **3214 PRITCHARD DR**

City <b>RACINE</b>	State <b>WI</b>	Zip Code <b>53406</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125551**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**970.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 1240 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

**A. Full Name (Last, First, Middle Initial)**

LLOYD OLSON

Mailing Address 3214 PRITCHARD DR

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Transaction ID : SA17A.125552

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)**

LLOYD OLSON

Mailing Address 3214 PRITCHARD DR

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Transaction ID : SA17A.125553

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)**

RAMON E OLSON

Mailing Address N50W23076 BETKER DR

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17A.125555

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1200.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1241 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT OLSON**

Mailing Address 2955 MAIN STREET, STE 300

City	State	Zip Code
IRVINE	CA	92614

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
R D OLSON CONSTRUCTION

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125557**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT OLSON**

Mailing Address 2955 MAIN STREET, STE 300

City	State	Zip Code
IRVINE	CA	92614

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
R D OLSON CONSTRUCTION

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128731**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN ONEIL**

Mailing Address 200 HARBORVIEW DRIVE

City	State	Zip Code
TAVERNIER	FL	33070

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125562**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1242 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CONNIE ONEILL**

Mailing Address 153 BAY DRIVE

City	State	Zip Code
HENDERSONVILLE	TN	37075

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

**Transaction ID : SA17A.125563**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 18 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHERRIE ORANGE**

Mailing Address 1210 MARTHA LEEVILLE

City	State	Zip Code
LEBANON	TN	37090

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125565**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HENRY ORLINSKY**

Mailing Address 586 SUNDERLAND ROAD

City	State	Zip Code
TEANECK	NJ	07666

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125567**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1243 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN H ORNE**

Mailing Address **S6W31202 HIDDEN HOLW**

City <b>DELAFIELD</b>	State <b>WI</b>	Zip Code <b>53018</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125569**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 14 / 2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUSAN H ORNE**

Mailing Address **S6W31202 HIDDEN HOLW**

City <b>DELAFIELD</b>	State <b>WI</b>	Zip Code <b>53018</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125570**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 14 / 2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOANNE ORR**

Mailing Address **19 PAR CLUB CIR**

City <b>VILLAGE OF GO</b>	State <b>FL</b>	Zip Code <b>33436</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125572**

Date of Receipt

M M / D D / Y Y Y Y
<b>08 / 19 / 2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1244 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM ORR**

Mailing Address 103 S ELM ST

City	State	Zip Code
ITASCA	TX	76055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ORRICO INTERNATIONAL

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125574**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SHARON T ORTHWEIN**

Mailing Address 1404 ELMHURST LANE

City	State	Zip Code
FLOWER MOUND	TX	75028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125576**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PHYLLIS ORTMAN**

Mailing Address 1244 BELLEVIEW DRIVE

City	State	Zip Code
FORT COLLINS	CO	80526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.125577**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	5

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

775.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1245 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM S ORTWEIN**

Mailing Address 4376 STILSON CIR

City	State	Zip Code
PEACHTREE COR	GA	30092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALSTON&BIRD LLP.**

Occupation  
**PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125579**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK OSBORN**

Mailing Address 301 LA COLINA DR

City	State	Zip Code
REDLANDS	CA	92374

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**UNIVERSITY OF REDLANDS**

Occupation  
**PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125581**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM OSTREAM**

Mailing Address 15455 PASEO DEL SUR

City	State	Zip Code
SAN DIEGO	CA	92127

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.125583**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1246 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANNETTE K OSTROM**

Mailing Address 4200 OLD MILITARY RD

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PFIZER**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125585**

Date of Receipt

**09 / 15 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES J OSTROM**

Mailing Address 4200 OLD MILITARY ROAD

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125587**

Date of Receipt

**09 / 15 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES J OSTROM**

Mailing Address 4200 OLD MILITARY ROAD

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125588**

Date of Receipt

**09 / 15 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1247 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM OSTROM**

Mailing Address 35115 CARNATION LN

City	State	Zip Code
INDIAN LAND	SC	29707

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125589**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VICTORIA OSTRY**

Mailing Address 3725 YUKON RD

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125591**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VICTORIA OSTRY**

Mailing Address 3725 YUKON RD

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125592**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1248 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK OTT**

Mailing Address 2381 S. BRENTWOOD ST

City	State	Zip Code
LAKEWOOD	CO	80227

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.125593**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KARL G OTZEN**

Mailing Address P.O. BOX 190

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.125595**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS W OUTMAN**

Mailing Address 835 VILLA PARK CT

City	State	Zip Code
FORT WAYNE	IN	46808

FEC ID number of contributing federal political committee.

C

Name of Employer  
OUTMAN INDUSTRIES, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125597**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2775.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1249 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALEXANDE P OWEN**

Mailing Address P.O. BOX 2348

City	State	Zip Code
JANESVILLE	WI	53547

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHAMBERS AND OWEN

Occupation  
BUYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125599**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL OWENS**

Mailing Address 425 HUDSON AVE

City	State	Zip Code
CLARENDON HIL	IL	60514

FEC ID number of contributing federal political committee.

C

Name of Employer  
OSG GLOBAL

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125601**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAT OWENS**

Mailing Address 157 SCOTT LN

City	State	Zip Code
PRATTVILLE	AL	36066

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125603**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1250 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD O'BRIEN**

Mailing Address PO BOX 698

City

WHITE STONE

State

VA

Zip Code

22578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125607**

Date of Receipt

07

18

2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT O'BRIEN**

Mailing Address 524 DARTMOUTH PLACE

City

LA CANADA

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARENT FOX LLP

Occupation

ATTORNEY

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.125609**

Date of Receipt

06

26

2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM O'BRIEN**

Mailing Address 124 FORECASTLE CT

City

WASHINGTON

State

NC

Zip Code

27889

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125611**

Date of Receipt

07

13

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1251 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MIKE O'HANLON**

Mailing Address 1707 REMINIGTON ST

City	State	Zip Code
PLEASANT HILL	MO	64080

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NASB

Occupation  
NET ADMIN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125613**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARION PACE**

Mailing Address 1301 38TH ST

City	State	Zip Code
SACRAMENTO	CA	95816

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125615**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT PACINI**

Mailing Address 3355 WEST ALABAMA SUITE

City	State	Zip Code
HOUSTON	TX	77098

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125617**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1550.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1252 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****DIANNE PADGETT**

Mailing Address 10803 BURGOYNE ROAD

City	State	Zip Code
HOUSTON	TX	77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
CONSULTING GEOPHYSICIST

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.125618**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****DIANNE PADGETT**

Mailing Address 10803 BURGOYNE ROAD

City	State	Zip Code
HOUSTON	TX	77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
CONSULTING GEOPHYSICIST

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.125619**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****DIANNE PADGETT**

Mailing Address 10803 BURGOYNE ROAD

City	State	Zip Code
HOUSTON	TX	77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
CONSULTING GEOPHYSICIST

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.125620**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

650.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1253 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANNE PADGETT**

Mailing Address 10803 BURGOYNE ROAD

City	State	Zip Code
HOUSTON	TX	77042

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTING GEOPHYSICIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.125621**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAREN PAGANINI**

Mailing Address 8863 ROBIN LANE

City	State	Zip Code
KIRTLAND	OH	44094

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
K & D GROUP

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125623**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT PAGETT**

Mailing Address 800 WHISPERING PINES

City	State	Zip Code
SCOTTS VALLEY	CA	95066

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ASSIST INTERNATIONAL

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125625**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1254 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN PAGIN**

Mailing Address 104 WAYNE ST

City State Zip Code  
HOWE IN 46746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125627**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PETER PAIROLERO**

Mailing Address 1215 19TH AVE NE

City State Zip Code  
ROCHESTER MN 55906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125629**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW PALEC**

Mailing Address 7435 W. WELLS STREET

City State Zip Code  
WAUWATOSA WI 53213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C.D. SMITH CONSTRUCTION

Occupation  
CONSTRUCTION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125631**

Date of Receipt

M M / D D / Y Y Y Y  
07 28 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1050.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1255 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**COLLEEN PALMER**

Mailing Address 1302 49TH STREET SE

City	State	Zip Code
AUBURN	WA	98092

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125633**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID PALMER**

Mailing Address 204 RAINS RD

City	State	Zip Code
HUNTINGTON	TX	75949

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125635**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HALL PALMER**

Mailing Address 501 SNELL ISLE BLVD NE

City	State	Zip Code
SAINT PETERSBURG	FL	33704

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125637**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1256 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LYNN PALMER**

Mailing Address 2005 COACHLIGHT CT

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125639**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE PALMETEER**

Mailing Address 16680 W 11TH AVE

City	State	Zip Code
GOLDEN	CO	80401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125641**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**E. SCOTT PALMETZ**

Mailing Address 1136 LAVENDER LANE

City	State	Zip Code
LA CANADA	CA	91011

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PALMER, DOMBATLDI & DONOHUE, LLP

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.125643**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1257 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALEJANDRO PALOMARES**

Mailing Address 5802 BOB BULLOCK LOOP C1-23-147

City	State	Zip Code
LAREDO	TX	78041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BIBLE COLLEGE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125645**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIE PALOMARES**

Mailing Address 5802 BOB BULLOCK LOOP C1-23-147

City	State	Zip Code
LAREDO	TX	78041

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BIBLE COLLEGE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125647**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT T PALTZER**

Mailing Address PO BOX 1933

City	State	Zip Code
APPLETON	WI	54912

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125649**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1258 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT T PALTZER**

Mailing Address PO BOX 1933

City State Zip Code  
APPLETON WI 54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125650**

Date of Receipt

M M / D D / Y Y Y Y  
07 17 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PANKRATZ**

Mailing Address 9219 BEVERLY PL

City State Zip Code  
WAUWATOSA WI 53226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125652**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD PANKRATZ**

Mailing Address 2401 N. 70TH STREET

City State Zip Code  
WAUWATOSA WI 53213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IFS NORTH AMERICA, INC

Occupation  
IT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125654**

Date of Receipt

M M / D D / Y Y Y Y  
07 14 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1259 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANDREAS PANOPOULOS**

Mailing Address 4730 NOYES ST.

City	State	Zip Code
SAN DIEGO	CA	92109

FEC ID number of contributing federal political committee.

C

Name of Employer  
FLOWJO

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125656**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LARRY PAPASAN**

Mailing Address 5114 WINTON PLACE

City	State	Zip Code
MEMPHIS	TN	38117

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125658**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARRY PAPASAN**

Mailing Address 5114 WINTON PLACE

City	State	Zip Code
MEMPHIS	TN	38117

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125659**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1260 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARYN PAPENTHIEN**

Mailing Address 2811 MAKOU TRL

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125661**

Date of Receipt

**07 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARYN PAPENTHIEN**

Mailing Address 2811 MAKOU TRL

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COURI INSURANCE

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125662**

Date of Receipt

**07 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KELLY PAPENTHIEN**

Mailing Address 2811 MAKOU TRL

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STAFF ELECTRIC

Occupation  
MASTER ELECTRICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125664**

Date of Receipt

**07 / 07 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1261 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANALU PARCHMAN**

Mailing Address 408 LISCIO CV

City	State	Zip Code
GEORGETOWN	TX	78628

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

**Transaction ID : SA17A.125665**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACQUES W PARE**

Mailing Address 10150 GREENSWARD LIN

City	State	Zip Code
IJAMSVILLE	MD	21754

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FREDERICK'S RENTAL INVESTMEN

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125667**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH PARIS**

Mailing Address 2707 UTICA PIKE

City	State	Zip Code
JEFFERSONVILL	IN	47130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125669**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1025.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1262 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID PARKER**

Mailing Address 1608 SAINT ANDREWS R  
G

City Greensboro State NC Zip Code 00000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TRIANGLE CAPITAL CORP

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125671**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACOB PARKER**

Mailing Address 4757 BELLA COLLINA CT.

City Colorado Springs State CO Zip Code 80906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US-CHINA BUSINESS COUNCIL

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125672**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACOB PARKER**

Mailing Address 4757 BELLA COLLINA CT.

City Colorado Springs State CO Zip Code 80906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US-CHINA BUSINESS COUNCIL

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

**Transaction ID : SA17A.125673**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2015

Amount of Each Receipt this Period

30.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

630.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1263 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ARLIS B PARKHURST**

Mailing Address 10260 STRAIT LN

City	State	Zip Code
DALLAS	TX	75229

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125675**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA PARNES**

Mailing Address 5445 NW 41ST STREET TERRACE

City	State	Zip Code
BOCA RATON	FL	33496

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128811**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT PARNES**

Mailing Address 5445 NW 41ST STREET TERRACE

City	State	Zip Code
BOCA RATON	FL	33496

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125677**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1264 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT PARNES**

Mailing Address **5445 NW 41ST STREET TERRACE**

City	State	Zip Code
BOCA RATON	FL	33496

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES PARSONS**

Mailing Address **104 RICHARD RD**

City	State	Zip Code
SYRACUSE	NY	13215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PARSONS & ASSOCIATES, INC

Occupation  
INS BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125678**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES PARSONS**

Mailing Address **104 RICHARD RD**

City	State	Zip Code
SYRACUSE	NY	13215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PARSONS & ASSOCIATES, INC

Occupation  
INS BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.125679**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

350.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1265 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET PARTSCH**

Mailing Address 14881 RIVER RD NE

City	State	Zip Code
GERVAIS	OR	97026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

232.00

**Transaction ID : SA17A.125680**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

60.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM PASCALE**

Mailing Address 360 LENNI ROAD

City	State	Zip Code
ASTON	PA	19014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125682**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM PASCALE**

Mailing Address 360 LENNI ROAD

City	State	Zip Code
ASTON	PA	19014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.125683**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

810.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1266 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM PASCALE**

Mailing Address 360 LENNI ROAD

City	State	Zip Code
ASTON	PA	19014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125684**

Date of Receipt

**09 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS PASSIOS**

Mailing Address 44 CEDAR CLIFF RD

City	State	Zip Code
RIVERSIDE	CT	06878

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PINNACLE ASSOCIATES LTD

Occupation  
INVESTMENT ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125686**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BEVERLY PATRICK**

Mailing Address W3746 W RIB RD

City	State	Zip Code
WESTBORO	WI	54490

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PATRICK FUR FARM INC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125688**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1267 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TIM PATRICK**

Mailing Address P.O. BOX 1010

City	State	Zip Code
RAVENNA	OH	44266

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PATRICK INC.**

Occupation  
**SMALL BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125690**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRIOT INVESTMENTS, LP**

Mailing Address 901 SOUTH MOPAC EXPRESSWAY

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MANAGING PARTNER, PATRIOT INVESTMENTS**

Occupation  
**OIL & GAS E & P**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125692**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

LLP INFORMATION REQUESTED

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID PATTEN**

Mailing Address 315 LANSLOWNE ROAD

City	State	Zip Code
HAVERTOWN	PA	19083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125694**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1268 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BETTY PATTERSON**

Mailing Address 165 W. JACKSON ST.  
P.O. BOX 101

City	State	Zip Code
MILLERSBURG	OH	44654

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RECRUITER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125696**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHLEEN PATTERSON**

Mailing Address 1450 SYLVANER AVE.

City	State	Zip Code
ST. HELENA	CA	94574

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125698**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CARTER PATTESON**

Mailing Address 2700 HARRISBURG RD

City	State	Zip Code
JONESBORO	AR	72401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.125699**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1269 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARTER PATTESON**

Mailing Address 2700 HARRISBURG RD

City	State	Zip Code
JONESBORO	AR	72401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1101.00

**Transaction ID : SA17A.125700**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARTER PATTESON**

Mailing Address 2700 HARRISBURG RD

City	State	Zip Code
JONESBORO	AR	72401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1201.00

**Transaction ID : SA17A.125701**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KYLE PATTISON**

Mailing Address 1303 E WEBSTER ST

City	State	Zip Code
PRAIRIE DU CH	WI	53821

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PATTISON SAND COMPANY LLC

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125703**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

101.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1270 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHELE M PATTISON**

Mailing Address 1303 E WEBSTER ST

City	State	Zip Code
PRAIRIE DU CH	WI	53821

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PATTISON SAND COM

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125705**

Date of Receipt

**07** / **28** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHELE M PATTISON**

Mailing Address 1303 E WEBSTER ST

City	State	Zip Code
PRAIRIE DU CH	WI	53821

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PATTISON SAND COM

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125706**

Date of Receipt

**07** / **28** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID PATTON**

Mailing Address PO BOX 9570

City	State	Zip Code
AVON	CO	81620

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INTEGRATED WATER SERVICES, INC.

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125708**

Date of Receipt

**07** / **19** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1271 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLIFFORD PAUL**

Mailing Address 3401 E MISSION LN

City	State	Zip Code
PHOENIX	AZ	85028

FEC ID number of contributing federal political committee.

C

Name of Employer  
PK ASSOCIATES

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125710**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLIFFORD PAUL**

Mailing Address 3401 E MISSION LN

City	State	Zip Code
PHOENIX	AZ	85028

FEC ID number of contributing federal political committee.

C

Name of Employer  
PK ASSOCIATES

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

**Transaction ID : SA17A.125711**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

550.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CLIFFORD PAUL**

Mailing Address 3401 E MISSION LN

City	State	Zip Code
PHOENIX	AZ	85028

FEC ID number of contributing federal political committee.

C

Name of Employer  
PK ASSOCIATES

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

**Transaction ID : SA17A.125712**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1272 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDA PAUL**

Mailing Address 6717 S YALE AVE STE 107

City	State	Zip Code
TULSA	OK	74136

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.81407**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA PAUL**

Mailing Address 6717 S YALE AVE STE 107

City	State	Zip Code
TULSA	OK	74136

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.125713**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM PAULEA**

Mailing Address 5161 SAN FELIPE SET 320

City	State	Zip Code
HOUSTON	TX	77056

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125715**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1273 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARTHA PAULISSIAN**

Mailing Address 3848 WINFORD DR

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.125716**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARTHA PAULISSIAN**

Mailing Address 3848 WINFORD DR

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125717**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTHA PAULISSIAN**

Mailing Address 3848 WINFORD DR

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

**Transaction ID : SA17A.125718**

Date of Receipt

**08 / 01 / 2015**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

110.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1274 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARTHA PAULISSIAN**

Mailing Address 3848 WINFORD DR

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

**Transaction ID : SA17A.125719**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARTHA PAULISSIAN**

Mailing Address 3848 WINFORD DR

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

**Transaction ID : SA17A.125720**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTHA PAULISSIAN**

Mailing Address 3848 WINFORD DR

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

**Transaction ID : SA17A.125721**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		16		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

125.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1275 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MARTHA PAULISSIAN**

Mailing Address **3848 WINFORD DR**

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**485.00**

**Transaction ID : SA17A.125722**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

**75.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MARTHA PAULISSIAN**

Mailing Address **3848 WINFORD DR**

City	State	Zip Code
TARZANA	CA	91356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**520.00**

**Transaction ID : SA17A.125723**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

**35.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ALICIA D PAVELSKI**

Mailing Address **4390 DEER ROAD**

City	State	Zip Code
WISCONSIN DEL	WI	54494

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.125725**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2610.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1276 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JEREMIE PAVELSKI**

Mailing Address 907 3RD AVENUE

City	State	Zip Code
HANCOCK	WI	54943

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HEARTLAND FARMS, INC.

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125727**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JEREMIE M PAVELSKI**

Mailing Address 4390 DEER ROAD

City	State	Zip Code
WISCONSIN DEL	WI	54494

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.125729**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN PAWULA**

Mailing Address 1113 S WALNUT AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LA MARCHE MANUFACTURING  
COMPANY

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.125730**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Amount of Each Receipt this Period

35.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3035.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1277 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN PAWULA**

Mailing Address 1113 S WALNUT AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LA MARCHE MANUFACTURING COMPANY**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

**Transaction ID : SA17A.125731**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA PEACOCK**

Mailing Address 7286 SNOWBERRY LN

City	State	Zip Code
CANAL WINCHES	OH	43110

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125732**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNY PEARCE**

Mailing Address 6605 GESSNER

City	State	Zip Code
HOUSTON	TX	77040

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE NUR PLACE INC**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125734**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

635.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1278 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN PEARSON**

Mailing Address 51 PINE ST

City	State	Zip Code
RYE	NH	03870

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PEARSON**

Mailing Address 51 PINE ST

City	State	Zip Code
RYE	NH	03870

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.125737**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN PEARSON**

Mailing Address 51 PINE ST

City	State	Zip Code
RYE	NH	03870

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.125738**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

375.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1279 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN PEARSON**

Mailing Address **PO BOX 683**

City State Zip Code  
**WATERSMEET MI 49969**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125739**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT PEASE**

Mailing Address **954 BAL ISLE DRIVE**

City State Zip Code  
**FORT MYERS FL 33919**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TRIPLE J MGNT LLC**

Occupation  
**TREASURER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125741**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARK PECHECK**

Mailing Address **14265 GREENLEAF STREET**

City State Zip Code  
**SHERMAN OAKS CA 91423**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GIBSON, DUNN & CRUTCHER LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.125743**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3100.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1280 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN PECK**

Mailing Address **PO BOX 829**

City State Zip Code  
**RANCHO SANTA FE CA 92067**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PECK ENTERPRISES**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125745**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VERA PECK**

Mailing Address **PO BOX 829**

City State Zip Code  
**RANCHO SANTA FE CA 92067**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125747**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL V PECORA**

Mailing Address **5119 SMOKETHORN TRAIL**

City State Zip Code  
**BELVIDERE IL 61008**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.125749**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**6900.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1281 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANA PELAN**

Mailing Address 1891 SAND CREEK. DR

City	State	Zip Code
PROSPER	TX	75078

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BED BATH AND BEYOND**

Occupation  
**REGIONAL VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125751**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JILL PELISEK**

Mailing Address 7615 N RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125753**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THEODORE PELLA**

Mailing Address 4485 BRITTANY DR

City	State	Zip Code
REDDING	CA	96002

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TED PELLA INC**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125754**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1282 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES PELURA**

Mailing Address 3725 TANGLEWOOD LN

City	State	Zip Code
DAVIDSONVILLE	MD	21035

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
VETERINARIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125756**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY PENCE**

Mailing Address 43959 FENNER AVE

City	State	Zip Code
LANCASTER	CA	93536

FEC ID number of contributing federal political committee.

C

Name of Employer  
RE/MAX ALL PRO

Occupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.125758**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DIANE PENDLETON**

Mailing Address PO BOX 2717

City	State	Zip Code
PONTE VEDRA B	FL	32004

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.125759**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

720.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JUDITH A PENGRA**

Mailing Address **N1549 WILDWOOD RD**

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125761**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT PENNINGTON**

Mailing Address **9 RED COAT PASS**

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**10800.00**

**Transaction ID : SA17A.125763**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

**10800.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT PENNINGTON**

Mailing Address **9 RED COAT PASS**

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125763.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REATTRIBUTION TO JOAN PENNINGTON

Amount of Each Receipt this Period

**-5400.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**11300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOAN PENNINGTON**

Mailing Address **9 RED COAT PASS**

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125763.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REATTRIBUTION FROM ROBERT PENNINGTON;  
SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOAN PENNINGTON**

Mailing Address **9 RED COAT PASS**

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125763.2**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOAN PENNINGTON**

Mailing Address **9 RED COAT PASS**

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125763.3**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON  
11/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1285 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT PENNINGTON**

Mailing Address 9 RED COAT PASS

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125763.4**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT PENNINGTON**

Mailing Address 9 RED COAT PASS

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125763.5**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM PERKINS**

Mailing Address 3 SOMERVILLE COURT

City	State	Zip Code
SAN ANTONIO	TX	78257

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.125767**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LA VONNE PERKINS**

Mailing Address 7600 W RIVERSIDE DR

City	State	Zip Code
CASPER	WY	82604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ADVANCED HEATING & PLUM

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125769**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUZANNE PERKINS**

Mailing Address 1106 COAST VILLAGE RD., SUITE C

City	State	Zip Code
SANTA BARBARA	CA	93108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125771**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY PERLOW**

Mailing Address 9926 CLEARFIELD AVE

City	State	Zip Code
VIENNA	VA	22181

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125773**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1287 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHIRLEY A PERNOT**

Mailing Address **N7534 TROW RD**

City <b>BROOKLYN</b>	State <b>WI</b>	Zip Code <b>53521</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**UNIVERSITY OF WISCONSIN MEDI**

Occupation  
**PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.125775**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 22 / 2015</b>

Amount of Each Receipt this Period

**225.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RON PERRI**

Mailing Address **9653 GULF SHORE DR**

City <b>NAPLES</b>	State <b>FL</b>	Zip Code <b>34108</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125777**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 21 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DALE PERRY**

Mailing Address **PO BOX 5923**

City <b>GAINESVILLE</b>	State <b>GA</b>	Zip Code <b>30504</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125779**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 20 / 2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**975.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1288 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DALE PERRY**

Mailing Address PO BOX 5923

City State Zip Code  
GAINESVILLE GA 30504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

710.00

**Transaction ID : SA17A.125780**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

210.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JACK PERRY**

Mailing Address 962 WHITE BEAR ROAD

City State Zip Code  
BIRDSBORO PA 19508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125782**

Date of Receipt

M M / D D / Y Y Y Y  
07 14 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RANDALL PERRY**

Mailing Address 4554 W WOOLWORTH AVE

City State Zip Code  
MILWAUKEE WI 53218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLOVER CREEK PARTNERS, LLC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125784**

Date of Receipt

M M / D D / Y Y Y Y  
07 17 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

960.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1289 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS PERSICH**

Mailing Address **N68W13430 WILD ROSE COURT**

City	State	Zip Code
<b>MENOMONEE FALLS</b>	<b>WI</b>	<b>53051</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125786**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILSON PERSINGER**

Mailing Address **905 QUAIL HOLLOW CIRCLE**

City	State	Zip Code
<b>DAKOTA DUNES</b>	<b>SD</b>	<b>57049</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WILSON TRAILER COMPANY**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125788**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALFRED PERSSON**

Mailing Address **35099 STATE HWY 74 #F3**

City	State	Zip Code
<b>HEMET</b>	<b>CA</b>	<b>92545</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CAB CHRISTIAN INC**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125790**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALAN D PETELINSEK**

Mailing Address **W342N5150 ROAD P**

City <b>OKAUCHEE</b>	State <b>WI</b>	Zip Code <b>53069</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125792**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID PETERS**

Mailing Address **2970A 28TH ST**

City <b>BIRCHWOOD</b>	State <b>WI</b>	Zip Code <b>54817</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LAKEPLACE.COM**

Occupation  
**REALTOR/BROKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**202.00**

**Transaction ID : SA17A.125793**

Date of Receipt

**09 / 16 / 2015**

Amount of Each Receipt this Period

**2.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES PETERSEN**

Mailing Address **2556 HEMMI ROAD**

City <b>BELLINGHAM</b>	State <b>WA</b>	Zip Code <b>98226</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125794**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1052.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1291 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES PETERSEN**

Mailing Address 2556 HEMMI ROAD

City	State	Zip Code
BELLINGHAM	WA	98226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125795**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES PETERSEN**

Mailing Address 2556 HEMMI ROAD

City	State	Zip Code
BELLINGHAM	WA	98226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125796**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN E PETERSON**

Mailing Address 646 PLUMTREE RD

City	State	Zip Code
GLEN ELLYN	IL	60137

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125798**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1292 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRUCE PETERSON**

Mailing Address 2633 W LAKE PARK COURT

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.125800**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARL PETERSON**

Mailing Address 3104 164TH AVE SE

City	State	Zip Code
HARWOOD	ND	58042

FEC ID number of contributing federal political committee.

C

Name of Employer  
PETERSON FARMS SEED

Occupation  
BUSINESS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125802**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS PETERSON**

Mailing Address 27470 HICKORY BLVD

City	State	Zip Code
BONITA SPRING	FL	34134

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125804**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3920.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1293 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**FRANKLIN PETERSON**

Mailing Address **PO BOX B**

City	State	Zip Code
KENYON	MN	55946

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125806**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JAMES PETERSON**

Mailing Address **PO BOX 73**

City	State	Zip Code
LODI	WI	53555

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125808**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN PETERSON**

Mailing Address **4442 VEREDA LUNA LLE**

City	State	Zip Code
SAN DIEGO	CA	92130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

**Transaction ID : SA17A.125809**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	5

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

850.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1294 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN PETERSON**

Mailing Address 4442 VEREDA LUNA LLE

City	State	Zip Code
SAN DIEGO	CA	92130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

**Transaction ID : SA17A.125810**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PETERSON**

Mailing Address 4442 VEREDA LUNA LLE

City	State	Zip Code
SAN DIEGO	CA	92130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

**Transaction ID : SA17A.125811**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JULIE PETERSON**

Mailing Address 3104 164TH AVE SE

City	State	Zip Code
HARWOOD	ND	58042

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PETERSON FARMS SEED

Occupation  
BUSINESS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125813**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2775.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1295 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANET L PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.125815**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANET L PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125816**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANET L PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125817**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1296 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANET L PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125818**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PARKER H PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MIMEDX GROUP, INC.

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125820**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PARKER H PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MIMEDX GROUP, INC.

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125821**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1297 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**PARKER H PETIT**

Mailing Address 1650 COX RD

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MIMEDX GROUP, INC.**

Occupation  
**C.E.O.**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125822**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ALYSSA PETRIE**

Mailing Address 5045 16TH AVE NE

City	State	Zip Code
SEATTLE	WA	98105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125824**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GARY PETTY**

Mailing Address 5457 ASHLEIGH RD

City	State	Zip Code
FAIRFAX	VA	22030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NATIONAL PRIVATE TRUCK**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.125826**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2903.00

**Total This Period** (last page this line number only) .....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1298 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****MARY J PFEIL**

Mailing Address 571 W LAKE DR

City  
NAPLESState Zip Code  
FL 34102FEC ID number of contributing  
federal political committee.**C**Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125828**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****MARY J PFEIL**

Mailing Address 571 W LAKE DR

City  
NAPLESState Zip Code  
FL 34102FEC ID number of contributing  
federal political committee.**C**Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125829**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item**C. Full Name (Last, First, Middle Initial)****RICHARD B PFEIL**

Mailing Address 571 W LAKE DR

City  
NAPLESState Zip Code  
FL 34102FEC ID number of contributing  
federal political committee.**C**Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125831**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1299 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SARAH J PFILE**

Mailing Address **N519 ROBINHOOD DR**

City <b>SHERWOOD</b>	State <b>WI</b>	Zip Code <b>54169</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PFILE HOMES**

Occupation  
**BUILDER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125833**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD PFISTER**

Mailing Address **10320 NURSERY RD**  
**L**

City <b>HAYWARD</b>	State <b>WI</b>	Zip Code <b>54843</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MIDWEST STIHL INC**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125835**

Date of Receipt

M M / D D / Y Y Y Y
06 / 23 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LISA PHILBROOK**

Mailing Address **807 CIRCLE DR**

City <b>BELLAIRE</b>	State <b>TX</b>	Zip Code <b>77401</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GREATER HOUSTON ANESTHESIOLOGY**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125836**

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1300 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL PHILLIPS**

Mailing Address **6020 STEFANIE WAY**

City <b>CALEDONIA</b>	State <b>WI</b>	Zip Code <b>53108</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128679**

Date of Receipt

**07 / 13 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY PHILLIPS**

Mailing Address **32683 GREENWELL SPRINGS ROAD**

City <b>GREENWELL SPRINGS</b>	State <b>LA</b>	Zip Code <b>70739</b>
----------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ACOUSTICAL SPECIALTIES**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125837**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**G NEIL PHILLIPS**

Mailing Address **PO BOX 90700**

City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30364</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125839**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**400.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1301 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**G NEIL PHILLIPS**

Mailing Address PO BOX 90700

City

ATLANTA

State

GA

Zip Code

30364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125840**

Date of Receipt

09

17

2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PHILLIPS**

Mailing Address 235 SWEET SPRINGS RO

G

City

GLENMORE

State

PA

Zip Code

00000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125842**

Date of Receipt

07

23

2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PENELOPE PHILLIPS**

Mailing Address 504 N. 88 ROAD

City

CARMICHAELS

State

PA

Zip Code

15320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.125843**

Date of Receipt

09

01

2015

Amount of Each Receipt this Period

85.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

685.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1302 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS PHILLIPS**

Mailing Address **6020 STEFANIE WAY**

City	State	Zip Code
CALEDONIA	WI	53108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125845**

Date of Receipt

**07 / 13 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS PHILLIPS**

Mailing Address **6020 STEFANIE WAY**

City	State	Zip Code
CALEDONIA	WI	53108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128677**

Date of Receipt

**07 / 13 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PEGGY PICHELMAN**

Mailing Address **2920 CASCO POINT ROAD**

City	State	Zip Code
WAYZATA	MN	55391

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125847**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1303 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT PIEPENBURG**

Mailing Address **3443 FARMERS WAY**

City <b>VALDOSTA</b>	State <b>GA</b>	Zip Code <b>31605</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VALDOSTA STATE U**

Occupation  
**LIBRARIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125849**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY PIERCE**

Mailing Address **101 W 67TH STREET, APT 49B**

City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10023</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SPC**

Occupation  
**FINANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125851**

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROY PIERCE**

Mailing Address **PO BOX 1160**

City <b>SAN ANTONIO</b>	State <b>FL</b>	Zip Code <b>33576</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**APOLLO**

Occupation  
**INV**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.125852**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1304 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIE PIERCE**

Mailing Address 1499 HIGHWAY 11

City	State	Zip Code
PETAL	MS	39465

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125854**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROGER PILC**

Mailing Address 53 WINTHROP DRIVE

City	State	Zip Code
RIVERSIDE	CT	06878

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PITNEY BOWES

Occupation  
TECHNOLOGY BUSINESS EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125856**

Date of Receipt

**07 / 08 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL PILLSBURY**

Mailing Address 3017 O ST NW

City	State	Zip Code
WASHINGTON	DC	20007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
POLITICAL SCIENCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125858**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1305 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RITA PINCSAK**

Mailing Address **2685 NORMAN DRIVE**

City **BROOKFIELD** State Zip Code **53045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125860**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLENE PINEDA**

Mailing Address **1145 PARKSTONE DR**

City **DRAPER** State **UT** Zip Code **84020**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INSURANCE SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125862**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED PINGLE**

Mailing Address **112 S BELLEMONT RD**

City **BLOOMINGTON** State **IL** Zip Code **61701**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**410.00**

**Transaction ID : SA17A.125863**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

**210.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**710.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1306 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**FRED PINGLE**

Mailing Address **112 S BELLEMONT RD**

City State Zip Code  
**BLOOMINGTON IL 61701**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**610.00**

**Transaction ID : SA17A.125864**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JANICE PINKSTON**

Mailing Address **20 TAMALPAIS AVE**

City State Zip Code  
**BELVEDERE CA 94920**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MERIDIAN PACIFIC LTD**

Occupation  
**COMMERCIAL REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125866**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DONALD PINS**

Mailing Address **19 W 127 AVENUE LATOUR**

City State Zip Code  
**OAK BROOK IL 60523**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125868**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**700.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1307 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD PINS**

Mailing Address 19 W 127 AVENUE LATOUR

City	State	Zip Code
OAK BROOK	IL	60523

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125869**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PISTORINO**

Mailing Address 6535 SW 123 ST

City	State	Zip Code
PINECREST	FL	33156

FEC ID number of contributing federal political committee.

C

Name of Employer  
PISTORINO AND ALAM ENGINEERS

Occupation  
PROFESSIONAL ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125870**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GENE PITTS**

Mailing Address 16490 SW TAFT CT

City	State	Zip Code
BEAVERTON	OR	97007

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125872**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1308 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM PITTS**

Mailing Address **116 ORCHARD LN**

City <b>CENTERVILLE</b>	State <b>GA</b>	Zip Code <b>31028</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125874**

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTIN H PITZER**

Mailing Address **5804 REDWOOD COURT**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75209</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125876**

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTIN H PITZER**

Mailing Address **5804 REDWOOD COURT**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75209</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125877**

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5650.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1309 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STARR L PITZER**

Mailing Address **5804 REDWOOD COURT**

City	State	Zip Code
DALLAS	TX	75209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125879**

Date of Receipt

**08 / 14 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN PLACE**

Mailing Address **34 POND LN**

City	State	Zip Code
BRYN MAWR	PA	19010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.125881**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAYMOND PLANK**

Mailing Address **21 APACHE RD**

City	State	Zip Code
CLEARMONT	WY	82835

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125883**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1310 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS PLANK**

Mailing Address **1629 BINGHAM DR**

City **KNOXVILLE** State **TN** Zip Code **37922**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**UNIVERSITY OF TENNESSEE COLLEGE OF L** Occupation  
**LAW PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125885**

Date of Receipt

**08** / **11** / **2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AL PLANTE**

Mailing Address **12 OHIO RD**

City **TYNGSBORO** State **MA** Zip Code **01879**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DIGITAL PROSPECTORS CORP, EXETER** Occupation  
**CONTRACT SW ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125887**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN PLATNER**

Mailing Address **439 MILLBURN AVE**

City **MILLBURN** State **NJ** Zip Code **07041**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JP MORGAN** Occupation  
**ANALYST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125889**

Date of Receipt

**07** / **16** / **2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1050.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1311 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER PLATTEN II**

Mailing Address 561 HARBOR POINT ROAD

City	State	Zip Code
LONGBOAT KEY	FL	34228

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125891**

Date of Receipt

**09 / 15 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL PLAYER**

Mailing Address 5007 VERNON SPRINGS

City	State	Zip Code
DUNWOODY	GA	30338

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.125892**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WAYNE PLAZA**

Mailing Address 7515 PELICAN BAY BLV

City	State	Zip Code
NAPLES	FL	34108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125894**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1312 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**D. D PLOCHER**

Mailing Address PO BOX 16065

City

CLAYTON

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125896**

Date of Receipt

**07** / **29** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**D. D PLOCHER**

Mailing Address PO BOX 16065

City

CLAYTON

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125897**

Date of Receipt

**07** / **29** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM PLOUFFE**

Mailing Address PO BOX 358

City

SAINT IGNACE

State

MI

Zip Code

49781

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

ENTREPRENEUR

Occupation

ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125899**

Date of Receipt

**07** / **20** / **2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1313 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES PLUMMER**

Mailing Address 3045 PARKDALE CT

City	State	Zip Code
EDGEWOOD	KY	41017

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.125901**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**R. J PLUMMER**

Mailing Address 7348 KINDLEWOOD DR

City	State	Zip Code
EDWARDSVILLE	IL	62025

FEC ID number of contributing federal political committee.

C

Name of Employer  
R. P. LUMBER

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125903**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT L PLUMMER**

Mailing Address 514 E VANDALIA ST

City	State	Zip Code
EDWARDSVILLE	IL	62025

FEC ID number of contributing federal political committee.

C

Name of Employer  
R.P. LUMBER

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125905**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1203.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1314 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ISABELLE POCHOWSKI**

Mailing Address 5821 S 19TH COURT

City	State	Zip Code
MILWAUKEE	WI	53221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125907**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL POCK**

Mailing Address 86 GRAND ST

City	State	Zip Code
SOUTH PORTLAN	ME	04106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POCK CARPENTRY LLC

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125908**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FRANCIS PODBIELSKI**

Mailing Address 212 MAPLEWOOD ROAD

City	State	Zip Code
RIVERSIDE	IL	60546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125910**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1350.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1315 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFFREY E PODJASEK**

Mailing Address 2299 TIMOTHY DRIVE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
A&J YOGURT LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129126**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY E PODJASEK**

Mailing Address 2299 TIMOTHY DRIVE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
A&J YOGURT LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129126.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFFREY E PODJASEK**

Mailing Address 2299 TIMOTHY DRIVE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
A&J YOGURT LLC

Occupation  
PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129126.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1316 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN T PODJASEK**

Mailing Address 1701 PRIMROSE LANE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GLENVIEW HOUSE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129122**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN T PODJASEK**

Mailing Address 1701 PRIMROSE LANE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GLENVIEW HOUSE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129122.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN T PODJASEK**

Mailing Address 1701 PRIMROSE LANE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GLENVIEW HOUSE

Occupation  
OWNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.129122.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1317 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET J PODVIN**

Mailing Address 2811 12TH STREET SOUTH

City	State	Zip Code
WISCONSIN RAP	WI	54494

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.125912**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERRY A POE**

Mailing Address PO BOX 2170

City	State	Zip Code
TUCCA VALLEY	CA	92286

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.125914**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TERRY A POE**

Mailing Address PO BOX 2170

City	State	Zip Code
TUCCA VALLEY	CA	92286

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.125915**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1318 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFFREY K POET**

Mailing Address 1425 TURNBERRY COURT

City	State	Zip Code
YORK	PA	17403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125917**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID POGGEMEIER**

Mailing Address 4 HUNTINGTON FOREST

City	State	Zip Code
ST. CHARLES	MO	63301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125919**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BLAIR POGUE**

Mailing Address 8372 GARLAND ROAD

City	State	Zip Code
DALLAS	TX	75218

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125921**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1319 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD POINSETTE**

Mailing Address 59 BRIDGETOWN RD

City	State	Zip Code
HILTON HEAD I	SC	29928

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125923**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANE POIRIER**

Mailing Address 3108 RIB MT WAY

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing federal political committee.

C

Name of Employer  
UMR

Occupation  
CASE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125925**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARRY POLHILL**

Mailing Address PO BOX 742

City	State	Zip Code
COLTON	CA	92324

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
COMMERCIAL FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125927**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1320 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD POLICKY**

Mailing Address **PO BOX 1378**

City State Zip Code  
**RAPID CITY SD 57709**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125929**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DONNA POLING**

Mailing Address **117 HARDEMAN STREET**

City State Zip Code  
**COPPERAS COVE TX 76522**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**260.00**

**Transaction ID : SA17A.125930**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DONNA POLING**

Mailing Address **117 HARDEMAN STREET**

City State Zip Code  
**COPPERAS COVE TX 76522**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**305.00**

**Transaction ID : SA17A.125931**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

**45.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**395.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1321 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DONNA POLING**

Mailing Address **117 HARDEMAN STREET**

City	State	Zip Code
<b>COPPERAS COVE</b>	<b>TX</b>	<b>76522</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**365.00**

**Transaction ID : SA17A.125932**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

**60.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DONNA POLING**

Mailing Address **117 HARDEMAN STREET**

City	State	Zip Code
<b>COPPERAS COVE</b>	<b>TX</b>	<b>76522</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**405.00**

**Transaction ID : SA17A.125933**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

**40.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DONNA POLING**

Mailing Address **117 HARDEMAN STREET**

City	State	Zip Code
<b>COPPERAS COVE</b>	<b>TX</b>	<b>76522</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**430.00**

**Transaction ID : SA17A.125934**

Date of Receipt

**09 / 25 / 2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**125.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1322 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HARVEY POLLACK**

Mailing Address 9855 W. HAWTHORNE RD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LAND TITLE SERVICES INC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125936**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HARVEY POLLACK**

Mailing Address 9855 W. HAWTHORNE RD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LAND TITLE SERVICES INC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125937**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARVEY POLLACK**

Mailing Address 9855 W. HAWTHORNE RD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LAND TITLE SERVICES INC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.125938**

Date of Receipt

**08 / 25 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1323 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATT POLLACK**

Mailing Address 1549 STRATFORD ROAD

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RED ROCK CUSTOM HOMES

Occupation  
BUILDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125940**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MATT POLLACK**

Mailing Address 1549 STRATFORD ROAD

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RED ROCK CUSTOM HOMES

Occupation  
BUILDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125940.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMIE POLLACK**

Mailing Address 1549 STRATFORD RD

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125940.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1324 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES W POLLARD**

Mailing Address 1116 STODDARD AVE

City	State	Zip Code
WHEATON	IL	60187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FAIRWYN INVSTEMENTS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125942**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES W POLLARD**

Mailing Address 1116 STODDARD AVE

City	State	Zip Code
WHEATON	IL	60187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FAIRWYN INVSTEMENTS

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125943**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES W POLLARD**

Mailing Address 1116 STODDARD AVE

City	State	Zip Code
WHEATON	IL	60187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FAIRWYN INVSTEMENTS

Occupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125944**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1325 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DICK POLLARD**

Mailing Address PO BOX 1978

City	State	Zip Code
LUBBOCK	TX	79408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125945**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD POLLOCK**

Mailing Address P.O. BOX 20404

City	State	Zip Code
ST. SIMONS ISLAND	GA	31522

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMORY UNIVERSITY

Occupation  
ACADEMICIAN AND AUTHOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

605.00

**Transaction ID : SA17A.125946**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

505.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD POLLOCK**

Mailing Address P.O. BOX 20404

City	State	Zip Code
ST. SIMONS ISLAND	GA	31522

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMORY UNIVERSITY

Occupation  
ACADEMICIAN AND AUTHOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

705.00

**Transaction ID : SA17A.125947**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

905.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1326 / 2740

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ALBERT POLMONARI**

Mailing Address **16 BALDWIN RD**

City	State	Zip Code
WESTFORD	MA	01886

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ASTRON, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125949**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DONALD POMPLIANO**

Mailing Address **14320 E KALIL DR**

City	State	Zip Code
SCOTTSDALE	AZ	85259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.125951**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN POPE**

Mailing Address **49 PACES WEST DR**

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PROGRAPHICS COMMUNICATIONS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125953**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1327 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM POPE**

Mailing Address **540 W SMUGGLER STREET**

City <b>ASPEN</b>	State <b>CO</b>	Zip Code <b>81611</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125955**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES B PORTER**

Mailing Address **PO BOX 1127**

City <b>CHADDS FORD</b>	State <b>PA</b>	Zip Code <b>19317</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125956**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD W PORTER**

Mailing Address **875 BRYANT AVE**

City <b>WINNETKA</b>	State <b>IL</b>	Zip Code <b>60093</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KIRKLAND & ELLIS, LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125958**

Date of Receipt

**06 / 22 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1328 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD W PORTER**

Mailing Address **875 BRYANT AVE**

City

**WINNETKA**

State

**IL**

Zip Code

**60093**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**KIRKLAND & ELLIS, LLP**

Occupation

**ATTORNEY**

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.125959**

Date of Receipt

**06**

**22**

**2015**

**REDESIGNATED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD W PORTER**

Mailing Address **875 BRYANT AVE**

City

**WINNETKA**

State

**IL**

Zip Code

**60093**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**KIRKLAND & ELLIS, LLP**

Occupation

**ATTORNEY**

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

**10800.00**

**Transaction ID : SA17A.125960**

Date of Receipt

**08**

**25**

**2015**

**SEE REATTRIBUTION**

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD W PORTER**

Mailing Address **875 BRYANT AVE**

City

**WINNETKA**

State

**IL**

Zip Code

**60093**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**KIRKLAND & ELLIS, LLP**

Occupation

**ATTORNEY**

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

**8100.00**

**Transaction ID : SA17A.125961**

Date of Receipt

**08**

**25**

**2015**

**SEE REATTRIBUTION**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1329 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD PORTILLO**

Mailing Address 18 W140 BUTTERFIELD ROA

City	State	Zip Code
OAKBROOK TERR	IL	60181

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PORTILLO RESTAURANT GROUP

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.125963**

Date of Receipt

**09 / 08 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD PORTILLO**

Mailing Address 18 W140 BUTTERFIELD ROA

City	State	Zip Code
OAKBROOK TERR	IL	60181

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PORTILLO RESTAURANT GROUP

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125964**

Date of Receipt

**09 / 08 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHARON PORTILLO**

Mailing Address 18W140 BUTTERFIELD ROAD

City	State	Zip Code
OAKBROOK TERR	IL	60181

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.125966**

Date of Receipt

**09 / 08 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1330 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLA J PORTMAN**

Mailing Address **N3598 HIGHLAND RD**

City	State	Zip Code
ANTIGO	WI	54409

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125968**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIM POSTON**

Mailing Address **4251 E. NATIONAL CEMETERY RD.**

City	State	Zip Code
FLORENCE	SC	29506

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RESTAURANT OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125970**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID POTGETER**

Mailing Address **190 92ND ST SE**

City	State	Zip Code
BYRON CENTER	MI	49315

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ETNA SUPPLY CO**

Occupation  
**VP SALES/PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125972**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1331 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HERMAN POTTRATZ**

Mailing Address **N3723 CLEVELAND AVE**

City <b>MARINETTE</b>	State <b>WI</b>	Zip Code <b>54143</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125974**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES POWELL**

Mailing Address **43960 STATE HWY 225**

City <b>BAY MINETTE</b>	State <b>AL</b>	Zip Code <b>36507</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AT&T**

Occupation  
**FACILITIES TECHNICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125976**

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTINE POWELL-MILLAR**

Mailing Address **912 VESSONA CIRCLE**

City <b>FOLSOM</b>	State <b>CA</b>	Zip Code <b>95630</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125978**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1332 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DARCY POWERS**

Mailing Address 350 S. NORTHWEST HIGHWAY SUITE 300

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128855**

Date of Receipt

**08** / **17** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN POWERS**

Mailing Address 350 S. NORTHWEST HIGHWAY SUITE 300

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5390.00

**Transaction ID : SA17A.125980**

Date of Receipt

**08** / **17** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5390.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN POWERS**

Mailing Address 350 S. NORTHWEST HIGHWAY SUITE 300

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2690.00

**Transaction ID : SA17A.128853**

Date of Receipt

**08** / **17** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5390.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1333 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LUE POWERS**

Mailing Address 410 S. BC AVE.

City	State	Zip Code
LYNDEN	WA	98264

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125982**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LUE POWERS**

Mailing Address 410 S. BC AVE.

City	State	Zip Code
LYNDEN	WA	98264

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.125983**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LUE POWERS**

Mailing Address 410 S. BC AVE.

City	State	Zip Code
LYNDEN	WA	98264

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.125984**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1334 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TAMMY POWERS**

Mailing Address **346 GREATON RD**

City <b>NEW RICHMOND</b>	State <b>WI</b>	Zip Code <b>54017</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DAREN J POWERS CPA**

Occupation  
**OFFICE MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.125985**

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Receipt this Period

**103.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VIANN POWERS**

Mailing Address **10805 DECKER CIRCLE**

City <b>RYE</b>	State <b>CO</b>	Zip Code <b>81069</b>
--------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.125986**

Date of Receipt

M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN POYSA**

Mailing Address **2261 CENTRAL PARK DRIVE**

City <b>CAMPBELL</b>	State <b>CA</b>	Zip Code <b>95008</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BECHTEL GLOBAL CORPORATION**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.125987**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**503.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1335 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN POYSA**

Mailing Address **2261 CENTRAL PARK DRIVE**

City	State	Zip Code
CAMPBELL	CA	95008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BECHTEL GLOBAL CORPORATION**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125988**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES H POYTHRESS**

Mailing Address **601 SQUAW CREEK RD**

City	State	Zip Code
WILLOW PARK	TX	76087

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.125990**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES PRATT**

Mailing Address **PO BOX 289**

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.125992**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1336 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA PRATT**

Mailing Address 6355 W DLD RD

City  
JUNIATA

State Zip Code  
NE 68955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

**Transaction ID : SA17A.125993**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 16 / 2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD F PREHN**

Mailing Address 1111 MCINDOE STREET

City  
WAUSAU

State Zip Code  
WI 54403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.125995**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED PREHN**

Mailing Address 413 JEFFERSON STREET

City  
WAUSAU

State Zip Code  
WI 54403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
DENTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1286.25

**Transaction ID : SA17A.125996**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

IN-KIND: CATERING SERVICES

Amount of Each Receipt this Period

1286.25

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1686.25

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1337 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDA PREHN**

Mailing Address **413 JEFFERSON STREET**

City <b>WAUSAU</b>	State <b>WI</b>	Zip Code <b>54403</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1286.25**

**Transaction ID : SA17A.125997**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

**IN-KIND: CATERING SERVICES**

Amount of Each Receipt this Period

**1286.25**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA PREHN**

Mailing Address **413 JEFFERSON STREET**

City <b>WAUSAU</b>	State <b>WI</b>	Zip Code <b>54403</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.125998**

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period

**1413.75**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HOMER PRESSLEY**

Mailing Address **126 HUNINGTON CHASE DRIVE**

City <b>MADISON</b>	State <b>AL</b>	Zip Code <b>35758</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126000**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1338 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID PRETASKY**

Mailing Address 220 17TH ST S

City	State	Zip Code
LA CROSSE	WI	54601

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126002**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN PRICE**

Mailing Address 810 SEVENTH AVENUE, 7TH FLOOR

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TOWNSQUARE MEDIA

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126004**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVEN PRICE**

Mailing Address 810 SEVENTH AVENUE, 7TH FLOOR

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TOWNSQUARE MEDIA

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128760**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1339 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TINA PRICE**

Mailing Address **810 SEVENTH AVENUE, 7TH FLOOR**

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128762**

Date of Receipt

**06 / 30 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MIGUEL PRIETTO**

Mailing Address **1462 FOOTHILL BLVD**

City	State	Zip Code
SANTA ANA	CA	92705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.126006**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LOLLY H PRINCE**

Mailing Address **42 WOODSIDE DR**

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126008**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1203.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1340 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY PRITCHARD**

Mailing Address **51A PECK AVE**

City	State	Zip Code
RYE	NY	10580

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**VERIZON COMMUNICATIONS**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126009**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD PROBST**

Mailing Address **9216 RIDGE BLVD**

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126011**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD PROBST**

Mailing Address **9216 RIDGE BLVD**

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126011.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2015

REATTRIBUTION TO LISA MAUER

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5500.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1341 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LISA A MAUER**

Mailing Address 9216 RIDGE BOULEVARD

City	State	Zip Code
WAUWATOSA	WI	53226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RICKERT INDUSTRIES**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126011.1**

Date of Receipt

**07 / 10 / 2015**

REATTRIBUTION FROM KEVIN PROBST

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NAZARO PROPATI**

Mailing Address 1703 ST. ANDREW DRIVE

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126013**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT PUCKETT**

Mailing Address 7640 N 175TH AVE

City	State	Zip Code
WADDELL	AZ	85355

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**KENNAMETAL, INC**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126015**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1342 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROLAND PUGH**

Mailing Address **400 MCFARLAND BOUELVARD**  
**S**

City **NORTHPORT** State **AL** Zip Code **35476**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**700.00**

**Transaction ID : SA17A.126017**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**700.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GREGORY PULIDO**

Mailing Address **901 WEST 9TH STREET #60**

City **AUSTIN** State **TX** Zip Code **78703**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HUMCO**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126019**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DONALD PULVER**

Mailing Address **1 FAYETTE STREET**  
**S**

City **CONSHOHOCKEN** State **PA** Zip Code **19428**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**OLIVER TYRONE PULVER CORPORATION**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126021**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**4400.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1343 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL PUM**

Mailing Address 2149 S. 116TH STREET

City	State	Zip Code
WEST ALLIS	WI	53227

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126023**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTI PUTZ**

Mailing Address 4682 N. VILLA RIDGE WAY

City	State	Zip Code
BOISE	ID	83703

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.126024**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRIAN PUTZKE**

Mailing Address 5295 TRUMAN PACETTI

City	State	Zip Code
SAINT AUGUSTI	FL	32092

FEC ID number of contributing federal political committee.

C

Name of Employer  
MOMENTUM TRANSPORTATION USA,  
INC

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126026**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

785.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1344 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN PUTZKE**

Mailing Address 5295 TRUMAN PACETTI

City	State	Zip Code
SAINT AUGUSTI	FL	32092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MOMENTUM TRANSPORTATION USA, INC.**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.126027**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN PUTZKE**

Mailing Address 5295 TRUMAN PACETTI

City	State	Zip Code
SAINT AUGUSTI	FL	32092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MOMENTUM TRANSPORTATION USA, INC.**

Occupation  
**PRESIDENT/CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126028**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREW PUZDER**

Mailing Address 570 MEADOW WOOD LANE

City	State	Zip Code
MONTECITO	CA	93108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126030**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1345 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANDREW PUZDER**

Mailing Address 570 MEADOW WOOD LANE

City	State	Zip Code
MONTECITO	CA	93108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128771**

Date of Receipt

**09 / 15 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEANNA PUZDER**

Mailing Address 570 MEADOW WOOD LANE

City	State	Zip Code
MONTECITO	CA	93108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128773**

Date of Receipt

**09 / 15 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID PYOTT**

Mailing Address PO BOX 50520

City	State	Zip Code
IRVINE	CA	92619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126032**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1346 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARRY QUART**

Mailing Address 1350 E FLAMINGO RD #349

City	State	Zip Code
LAS VEGAS	NV	89119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HERON THERAPEUTICS

Occupation  
RESEARCH

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126034**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA QUASEBARTH**

Mailing Address 1404 OXFORD AVE

City	State	Zip Code
AUSTIN	TX	78704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126036**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS QUICK**

Mailing Address 3616 WILDWOOD DRIVE

City	State	Zip Code
MANITOWOC	WI	54220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LAKESIDE FOODS MANITOWOC, WI

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126038**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1347 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN B QUINLAN**

Mailing Address 86 ORION RD

City	State	Zip Code
BERKELEY HEIG	NJ	07922

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126040**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES QUINN**

Mailing Address 369 BELVEDERE STREET

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMERICAN PROPERTY ENTERPRISES

Occupation  
CEO/PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126042**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVE QUINN**

Mailing Address 369 BELVEDERE STREET

City	State	Zip Code
LA JOLLA	CA	92037

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMERICAN PROPERTY ENTERPRISES

Occupation  
CEO/PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126044**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1348 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGO QUINN-ALBE**

Mailing Address 4149 BOULDER RDG

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126046**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RUSSELL RABITO**

Mailing Address 510 UNDERHILL RD

City	State	Zip Code
SCARSDALE	NY	10583

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UBS

Occupation  
MANAGING DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126048**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LON RABY**

Mailing Address 11 LEDGE VIEW DR SE

City	State	Zip Code
HUNTSVILLE	AL	35802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DERMATOLOGY ASSOCIATES

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126050**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1349 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHRYN M RADFORD**

Mailing Address 8379 SAUBY RD

City	State	Zip Code
LARSEN	WI	54947

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126052**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JONATHAN RADKE**

Mailing Address 136 SKYLINE DRIVE

City	State	Zip Code
CARPENTERSVILLE	IL	60110

FEC ID number of contributing federal political committee.

C

Name of Employer  
ANCHOR MECHANICAL, INC.

Occupation  
PROJECT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126054**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LOIS A RADKE**

Mailing Address 13546 W FOUNTAIN CT

City	State	Zip Code
NEW BERLIN	WI	53151

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126056**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1350 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTOP L RAFFERTY**

Mailing Address 2130 WINGFIELD ROAD

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126058**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN RAGLAND**

Mailing Address 12897 CAMINITO DE LAS OLAS

City	State	Zip Code
DEL MAR	CA	92014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126060**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BOBBY RAINES**

Mailing Address 154 SAINT ANDREWS DR

City	State	Zip Code
JACKSON	MS	39211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126061**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1351 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BOBBY RAINES**

Mailing Address 154 SAINT ANDREWS DR

City	State	Zip Code
JACKSON	MS	39211

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126062**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**C. RAINES**

Mailing Address 4431 WESTWAY AVE

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126064**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES RAINEY**

Mailing Address PO BOX 381

City	State	Zip Code
RIDGE	MD	20680

FEC ID number of contributing federal political committee.

C

Name of Employer  
IDC

Occupation  
BUSINESS EXEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126066**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1352 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE RAINIER**

Mailing Address 60 HARMONY RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126068**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLAIRE L RAINS**

Mailing Address 420 41ST AVENUE

City	State	Zip Code
SAN FRANCISCO	CA	94121

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126069**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN R RAITT**

Mailing Address 1111 MOHAWK ROAD

City	State	Zip Code
WILMETTE	IL	90091

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126071**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1353 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL RALSKY**

Mailing Address **606 WESTVIEW AVENUE**

City	State	Zip Code
NASHVILLE	TN	37205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GLOBALGR LLC**

Occupation  
**EXPORT CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1100.00**

**Transaction ID : SA17A.126072**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUG RALSTON**

Mailing Address **PO BOX 29188**

City	State	Zip Code
DALLAS	TX	75229

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RALSTON OUTDOOR**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126074**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRUCE RAMME**

Mailing Address **N51W34316 ENCHANTED COURT**

City	State	Zip Code
OKAUCHEE	WI	53069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126076**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1354 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN RANDALL**

Mailing Address **775 SUNRIDGE RD**

City <b>FAIRLAWN</b>	State <b>OH</b>	Zip Code <b>44333</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126077**

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN RANGOS**

Mailing Address **107 OSPREY CIRCLE**

City <b>BOCA RATON</b>	State <b>FL</b>	Zip Code <b>33431</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126079**

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROLAND RANTS**

Mailing Address **724 COLUMBIA ST NW**

City <b>OLYMPIA</b>	State <b>WA</b>	Zip Code <b>98501</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.126080**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1355 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**VALDENE RANUM**

Mailing Address 9200 YARROW ST UNIT A

City	State	Zip Code
BROOMFIELD	CO	80021

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VALDENE RANUM**

Mailing Address 9200 YARROW ST UNIT A

City	State	Zip Code
BROOMFIELD	CO	80021

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.126083**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ED RAPP**

Mailing Address 5215 N. ASHFORD DRIVE

City	State	Zip Code
PEORIA	IL	61615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CATERPILLAR

Occupation  
GROUP PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126085**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1356 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALLAN RAPPUHN**

Mailing Address 920 FLORENCE BOULEVARD

City	State	Zip Code
FLORENCE	AL	35630

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.126087**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WALTER RAQUET**

Mailing Address 78 ZACCHEUS MEAD LANE

City	State	Zip Code
GREENWICH	CT	06831

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GREENEARTH TECH

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : SA17A.126088**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARREN RASMUSSEN**

Mailing Address 350 S COLLIER BLVD

City	State	Zip Code
MARCO ISLAND	FL	34145

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126090**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1357 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT RATE**

Mailing Address **2221 E 56TH AVE**

City State Zip Code  
**HUTCHINSON KS 67502**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126092**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DIANE RATH**

Mailing Address **419 WILTSHIRE**

City State Zip Code  
**SAN ANTONIO TX 78209**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126094**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SUSANNE RATLIFF**

Mailing Address **2737 SOUTHWOOD ROAD**

City State Zip Code  
**BIRMINGHAM AL 35223**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.126096**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1358 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TIMOTHY S RATTRAY**

Mailing Address 923 5TH AVE

City	State	Zip Code
NEW YORK	NY	10021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126098**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RON RAU**

Mailing Address PO BOX 7428

City	State	Zip Code
NORTH AUGUSTA	SC	29861

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EXECUTIVE RELOCATION**

Occupation  
**TRUCK DRIVER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126100**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY RAUCH**

Mailing Address 6073 RESERVE DRIVE

City	State	Zip Code
BOULDER	CO	80303

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

535.00

**Transaction ID : SA17A.126101**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3450.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1359 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT M RAULAND**

Mailing Address **PO BOX 114**

City **WALWORTH** State **WI** Zip Code **53125**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE RAULAND AGENCY, INC**

Occupation  
**REALTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126103**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EILEEN N RAUSCHERT**

Mailing Address **24 HILLCREST DR**

City **BUSHNELL** State **IL** Zip Code **61422**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126105**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEAN RAVELING**

Mailing Address **295 SAINT ANDREWS DR**

City **HUDSON** State **WI** Zip Code **54016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RAVELING COMPANIES LLC**

Occupation  
**MANUFACTURING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126107**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1360 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JIM RAY**

Mailing Address 7733 FM 314 N

City	State	Zip Code
BROWNSBORO	TX	75756

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126109**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID RAYSICH**

Mailing Address 3135 CHERRY HILL DRIVE

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
PLUNKETT RAYSICH ARCHITECTS, LLP

Occupation  
ARCHITECT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126111**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOAN READ**

Mailing Address P.O. BOX 1060

City	State	Zip Code
MAGNOLIA	TX	77353

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126113**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1361 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY READ**

Mailing Address 6519 E MALCOMB DRIVE

City	State	Zip Code
PARADISE VALLEY	AZ	85253

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126115**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID R READING**

Mailing Address 1673 HUNTING CREEK D

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126117**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REALTORS DIRECT GIVER PROGRAM**

Mailing Address 4801 FOREST RUN ROAD, SUITE 201

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126119**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1362 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REALTORS DIRECT GIVER PROGRAM**

Mailing Address 4801 FOREST RUN ROAD, SUITE 201

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126120**

Date of Receipt

MM / DD / YYYY  
09 / 07 / 2015

**TOTAL EARMARKED THROUGH CONDUIT**

Amount of Each Receipt this Period

1700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM REDDING**

Mailing Address 1861 E FERN RD

City	State	Zip Code
LAKELAND	FL	33801

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126121**

Date of Receipt

MM / DD / YYYY  
08 / 23 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM REDDING**

Mailing Address 1861 E FERN RD

City	State	Zip Code
LAKELAND	FL	33801

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126122**

Date of Receipt

MM / DD / YYYY  
09 / 10 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1363 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES REDDY**

Mailing Address **2300 BARTON CREEK BLVD. #6**  
**AUSTIN, TX 78735**

City **AUSTIN** State **TX** Zip Code **78735**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126124**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**W. M REDEKER**

Mailing Address **4417 SOUTHERN AVENUE**

City **DALLAS** State **TX** Zip Code **75205**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126126**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JIM REDEL**

Mailing Address **1630 PARSIFAL ST NE**

City **ALBUQUERQUE** State **NM** Zip Code **87112**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.126127**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**75.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**825.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1364 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOE REDFIELD**

Mailing Address 20744 SW SKIVER ST.

City	State	Zip Code
ALOHA	OR	97078

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126129**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOAN REDFORD**

Mailing Address 1560 GRANADA AVENUE

City	State	Zip Code
SAN MARINO	CA	91108

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126131**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HERBERT REDL**

Mailing Address 83 STREAM LANE

City	State	Zip Code
PLEASANT VALL	NY	12569

FEC ID number of contributing federal political committee.

C

Name of Employer  
GUARDIAN SELF STORAGE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126133**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERIC REDMAN**

Mailing Address PO BOX 40

City	State	Zip Code
ATHOL	ID	83801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.126134**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ERIC REDMAN**

Mailing Address PO BOX 40

City	State	Zip Code
ATHOL	ID	83801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

**Transaction ID : SA17A.126135**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GREG J REED**

Mailing Address 900 HIGHWAY 78 EAST, SUITE 106

City	State	Zip Code
JASPER	AL	35501

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126137**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1366 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD REESE**

Mailing Address 2406 THORN PLACE

City	State	Zip Code
FULLERTON	CA	92835

FEC ID number of contributing federal political committee.

C

Name of Employer  
MOTION COMPONENTS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126139**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIMOTHY REGAN**

Mailing Address 503 S 249TH CIR

City	State	Zip Code
WATERLOO	NE	68069

FEC ID number of contributing federal political committee.

C

Name of Employer  
JD HEISKELL HOLDINGS LLC

Occupation  
EXECUTIVE VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126141**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LONA REGINELLI**

Mailing Address 14 QUISTA DR

City	State	Zip Code
CHICO	CA	95926

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.126142**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2075.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1367 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**LONA REGINELLI**

Mailing Address **14 QUISTA DR**

City State Zip Code  
**CHICO CA 95926**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**303.00**

**Transaction ID : SA17A.126143**

Date of Receipt

**09 / 02 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BRENDA REICHE**

Mailing Address **4033 ASHLAND AVENUE**

City State Zip Code  
**WAUSAU WI 54403**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALIGN, LLC**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126145**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KAREN REICHERT**

Mailing Address **20910 BRADFORD LN**

City State Zip Code  
**BROOKFIELD WI 53045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126147**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1300.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1368 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL REID**

Mailing Address 11 HARDING AVE

City  
LOCKPORT

State Zip Code  
NY 14094

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REID GROUP

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126149**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**T. L REID**

Mailing Address 1803 HACKBERRY RD

City  
BLOOMINGTON

State Zip Code  
IL 61704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126151**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM REID**

Mailing Address 445 MADISON ST

City  
DENVER

State Zip Code  
CO 80206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126153**

Date of Receipt

M M / D D / Y Y Y Y  
07 29 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1369 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENISE REIDER**

Mailing Address 2948 S. DENALI WAY

City	State	Zip Code
MERIDIAN	ID	83642

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NA

Occupation  
WIFE/MOTHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126155**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEITH REIHL**

Mailing Address 950 MINISINK WAY

City	State	Zip Code
WESTFIELD	NJ	07090

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
B.G.C. USA

Occupation  
COO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126157**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIM REILAND**

Mailing Address 641 N PLEASANT VIEW RD #168

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126159**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1370 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD REILLY**

Mailing Address 5 OLD FIELD PL

City State Zip Code  
NORWALK CT 06853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126161**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD REILLY**

Mailing Address 5 OLD FIELD PL

City State Zip Code  
NORWALK CT 06853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.126162**

Date of Receipt

M M / D D / Y Y Y Y  
07 27 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT D REILY**

Mailing Address PO BOX 80296

City State Zip Code  
NEW ORLEANS LA 70160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126164**

Date of Receipt

M M / D D / Y Y Y Y  
07 30 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

6000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1371 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT D REILY**

Mailing Address PO BOX 80296

City	State	Zip Code
NEW ORLEANS	LA	70160

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126165**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT D REILY**

Mailing Address PO BOX 80296

City	State	Zip Code
NEW ORLEANS	LA	70160

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126166**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GREG REIMAN**

Mailing Address 5850 N KENT AVENUE

City	State	Zip Code
WHITEFISH BAY	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126168**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1372 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHANIE REIN**

Mailing Address 291 CENTRAL PARK WEST, PENTHOUSE

City	State	Zip Code
NEW YORK	NY	10024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126170**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD REINHARD**

Mailing Address 75 HARVARD AVEE

City	State	Zip Code
PALMERTON	PA	18071

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126172**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD REINHARD**

Mailing Address 75 HARVARD AVEE

City	State	Zip Code
PALMERTON	PA	18071

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.126173**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3350.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1373 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CASEY REINHARDT**

Mailing Address 1 CAMEL POINT DR

City	State	Zip Code
LAGUNA BEACH	CA	92651

FEC ID number of contributing federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126175**

Date of Receipt

MM / DD / YYYY  
08 / 04 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUGLAS F REINHARDT**

Mailing Address 1 CAMEL POINT DR

City	State	Zip Code
LAGUNA BEACH	CA	92651

FEC ID number of contributing federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126177**

Date of Receipt

MM / DD / YYYY  
08 / 04 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FREDERIC REINHARDT**

Mailing Address 9976 FAIRWAY VILLAS

City	State	Zip Code
PENSACOLA	FL	32514

FEC ID number of contributing federal political committee.

C

Name of Employer  
LCMS-OIM

Occupation  
MINISTER OF RELIGION

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126179**

Date of Receipt

MM / DD / YYYY  
07 / 16 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1374 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS E REINHART**

Mailing Address 504 COUNTRY CLUB LN

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

C

Name of Employer  
KWIK TRIP

Occupation  
EMPLOYEE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.126181**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY REINKEMEYER**

Mailing Address N4096 DUCK CREEK ROAD

City	State	Zip Code
HELENVILLE	WI	53137

FEC ID number of contributing federal political committee.

C

Name of Employer  
IBERDROLA RENEW

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126183**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROSALYN REISCHMAN**

Mailing Address 2102 COLLEGE STREET

City	State	Zip Code
JACKSONVILLE	FL	32204

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126185**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1375 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROSALYN REISCHMAN-**

Mailing Address 2102 COLLEGE STREET

City	State	Zip Code
JACKSONVILLE	FL	32204

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UNIVERSITY OF FLORIDA

Occupation  
NURSING FACULTY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126187**

Date of Receipt

**07** / **14** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WALTER A REISTER**

Mailing Address 7738 GREENBRIER DR NE

City	State	Zip Code
ROCKFORD	MI	49341

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126188**

Date of Receipt

**08** / **17** / **2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AUGUST REITER**

Mailing Address 9650 BUSINEESS CEBNTER DR

City	State	Zip Code
RANCHO CUCAMONGA	CA	91730

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REALESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126190**

Date of Receipt

**07** / **20** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1376 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**F ALEXANDER RELYEA**

Mailing Address 49 TECHNOLOGY DRIVE UNIT 89

City	State	Zip Code
BEDFORD	NH	03110

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126192**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN D REMICK**

Mailing Address 3232 FOX HOLLOW COURT SW

City	State	Zip Code
ROCHESTER	MN	55902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126194**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUSAN RENEAU**

Mailing Address 5425 SKYWAY DR

City	State	Zip Code
MISSOULA	MT	59804

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BLUE MOUNTAIN MARKETING

Occupation  
AUTHOR OF BOOKS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126196**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1377 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES REUL**

Mailing Address 2845 22ND AVE.

City	State	Zip Code
RICE LAKE	WI	54868

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARM

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126198**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARLEN REYNOLDS**

Mailing Address 290 EL CAMINO REAL

City	State	Zip Code
CHELSEA	AL	35043

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126200**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOAN K REYNOLDS**

Mailing Address 3709 WYNGATE COVE

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126202**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1378 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH REYNOLDS**

Mailing Address 1111 MORAN ROAD

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

C

Name of Employer  
EVANS, JONER & REYNOLDS

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126204**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAREN REYNOLDS**

Mailing Address 3225 N ABENDROTH ST

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126206**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RALPH F REYNOLDS**

Mailing Address 104 DELAFIELD ISLAND

City	State	Zip Code
DARIEN	CT	06820

FEC ID number of contributing federal political committee.

C

Name of Employer  
BIENVILLE CAPITAL

Occupation  
CO-FOUNDER & CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126208**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1379 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT REYNOLDS**

Mailing Address PO BOX 2863

City	State	Zip Code
TUSCALOOSA	AL	35403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**REYNOLDS, REYNOLDS & LITTLE LLC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126210**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT REYNOLDS**

Mailing Address PO BOX 2863

City	State	Zip Code
TUSCALOOSA	AL	35403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**REYNOLDS, REYNOLDS & LITTLE LLC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

**Transaction ID : SA17A.126211**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER RHEIN**

Mailing Address 1407 HOLMBY AVE

City	State	Zip Code
LOS ANGELES	CA	90024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SARLOT & RHEIN**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126213**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1380 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS RHEINGANS**

Mailing Address **N7897 COUNTY ROAD G**

City <b>IOLA</b>	State <b>WI</b>	Zip Code <b>54945</b>
---------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126215**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES RHEMER**

Mailing Address **40 TOPAZ WAY**

City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94131</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126217**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CLAYTON RHOADES**

Mailing Address **13302 ELLERTON TERRACE**

City <b>MIDLOTHIAN</b>	State <b>VA</b>	Zip Code <b>23113</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KINSALE INSURANCE GROUP**

Occupation  
**INSURANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126219**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2000.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1381 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLAYTON RHOADES**

Mailing Address 13302 ELLERTON TERRACE

City	State	Zip Code
MIDLOTHIAN	VA	23113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KINSALE INSURANCE GROUP

Occupation  
INSURANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.126220**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		30		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOY L RHODES**

Mailing Address 3643 LAUREL RIDGE

City	State	Zip Code
SPRINGDALE	AR	72764

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SMILE SHOPPE

Occupation  
BOOKKEEPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126222**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOY L RHODES**

Mailing Address 3643 LAUREL RIDGE

City	State	Zip Code
SPRINGDALE	AR	72764

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SMILE SHOPPE

Occupation  
BOOKKEEPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.126223**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1382 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS RHYNE**

Mailing Address **24951 SAUSALITO ST**

City	State	Zip Code
LAGUNA HILLS	CA	92653

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126225**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS RHYNE**

Mailing Address **24951 SAUSALITO ST**

City	State	Zip Code
LAGUNA HILLS	CA	92653

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.126226**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNIS RHYNE**

Mailing Address **24951 SAUSALITO ST**

City	State	Zip Code
LAGUNA HILLS	CA	92653

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**850.00**

**Transaction ID : SA17A.126227**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1383 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROGER RIACHI**

Mailing Address 19600 IDLEWOOD TRAIL

City	State	Zip Code
STRONGSVILLE	OH	44149

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RFC CONTRACTING

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126229**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LANCE RIBEIRO**

Mailing Address 40 PEASLEE COURT

City	State	Zip Code
HAMPSTEAD	NH	03841

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FIDELITY INVESTMENTS

Occupation  
DBA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126231**

Date of Receipt

**09 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY RICCI**

Mailing Address W1264 SIENA CIR

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AURORA HEALTH SYSTEM

Occupation  
ORTHOPEDICAL SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126233**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1384 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENDA RICE**

Mailing Address 254 DUNTREATH ST

City	State	Zip Code
FRANKFORT	KY	40601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.126235**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

253.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID RICE**

Mailing Address 35 COVENTRY CIR

City	State	Zip Code
CLARKSVILLE	TN	37043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.126236**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HOWARD A RICE**

Mailing Address 723 STEUBEN STREET

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

402.00

**Transaction ID : SA17A.126237**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

277.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

630.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1385 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD RICHARDS**

Mailing Address 3389 VISTA VALLEY ROAD

City	State	Zip Code
AMITY	PA	15311

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126239**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARLO RICHARDSON**

Mailing Address 2339 19TH AVENUE

City	State	Zip Code
GREELEY	CO	80631

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MINERAL RESOURCES, INC.

Occupation  
BUSINESS GUY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126241**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLOTTE RICHARDSON**

Mailing Address 510 GORDON COURT

City	State	Zip Code
ATLANTA	GA	30320

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126243**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			02			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1386 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLOTTE RICHARDSON**

Mailing Address 510 GORDON COURT

City	State	Zip Code
ATLANTA	GA	30320

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

**Transaction ID : SA17A.126244**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN RICHARDSON**

Mailing Address 3836 TIMBERLINE WAY

City	State	Zip Code
BIRMINGHAM	AL	35243

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDIOTHORACIC SURGEONS PC

Occupation  
CARDIAC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126246**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAURICE RICHARDSON**

Mailing Address 5100 HIDDEN BRANCHES

City	State	Zip Code
DUNWOODY	GA	30338

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126247**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1387 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT E RICHARDSON**

Mailing Address **54969 WOODHOLD COURT**

City	State	Zip Code
ELKHART	IN	46516

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126249**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	5

**EARMARKED THROUGH CLUB FOR GROWTH PAC**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAWRENCE RICHMAN**

Mailing Address **7840 MISSION CENTER COURT #160**

City	State	Zip Code
SAN DIEGO	CA	92108

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RICHMAN TECHNOLOGY CORPORATION**

Occupation  
**CEO/PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126251**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANICE RICHTER**

Mailing Address **129 HOLMES MILL RD**

City	State	Zip Code
CREAM RIDGE	NJ	08514

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SENDZIK & SENDZIK P.C.**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126253**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1388 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH RICKARD**

Mailing Address 1720 MAPLE AVENUE

City	State	Zip Code
EVANSTON	IL	60201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INCAPITAL LLC

Occupation  
FINANCIAL TECHNOLOGY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126255**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DON RICKETTS**

Mailing Address 2464 S 182ND CIR

City	State	Zip Code
OMAHA	NE	68130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TD AMERITRADE

Occupation  
LEARNING AND DEVELOPMENT  
PROFESSIONAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126257**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOE RICKETTS**

Mailing Address 412 N ELMWOOD DRIVE

City	State	Zip Code
OMAHA	NE	68132

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128790**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2950.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1389 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARLENE RICKETTS**

Mailing Address 412 N ELMWOOD DRIVE

City	State	Zip Code
OMAHA	NE	68132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126259**

Date of Receipt

**06 / 26 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARLENE RICKETTS**

Mailing Address 412 N ELMWOOD DRIVE

City	State	Zip Code
OMAHA	NE	68132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128788**

Date of Receipt

**06 / 26 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICK RICKETTS**

Mailing Address 16723 LEAVENWORTH CIRCLE

City	State	Zip Code
OMAHA	NE	68118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
VINTAGE FINANCIAL GROUP

Occupation  
FINANCIAL PLANNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126261**

Date of Receipt

**06 / 30 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1390 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**TODD RICKETTS**

Mailing Address **510 LAUREL AVE**

City	State	Zip Code
WIMETTE	IL	60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ACTIVE CHAOS LLC**

Occupation  
**INVESTMENT MGR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126263**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TODD RICKETTS**

Mailing Address **510 LAUREL AVE**

City	State	Zip Code
WIMETTE	IL	60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ACTIVE CHAOS LLC**

Occupation  
**INVESTMENT MGR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126263.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SYLVIE LEGERE**

Mailing Address **510 LAUREL AVE**

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FOOV FITNESS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126263.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1391 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TODD RICKETTS**

Mailing Address 510 LAUREL AVE

City	State	Zip Code
WIMETTE	IL	60091

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ACTIVE CHAOS LLC

Occupation  
INVESTMENT MGR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.126264**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TODD RICKETTS**

Mailing Address 510 LAUREL AVE

City	State	Zip Code
WIMETTE	IL	60091

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ACTIVE CHAOS LLC

Occupation  
INVESTMENT MGR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126264.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TODD RICKETTS**

Mailing Address 510 LAUREL AVE

City	State	Zip Code
WIMETTE	IL	60091

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ACTIVE CHAOS LLC

Occupation  
INVESTMENT MGR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.126264.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1392 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**TODD RICKETTS**

Mailing Address **510 LAUREL AVE**

City	State	Zip Code
WIMETTE	IL	60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ACTIVE CHAOS LLC**

Occupation  
**INVESTMENT MGR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126264.2**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SYLVIE LEGERE**

Mailing Address **510 LAUREL AVE**

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FOOV FITNESS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126264.3**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SYLVIE LEGERE**

Mailing Address **510 LAUREL AVE**

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FOOV FITNESS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126264.4**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1393 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SYLVIE LEGERE**

Mailing Address **510 LAUREL AVE**

City **WILMETTE** State **IL** Zip Code **60091**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FOOV FITNESS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126264.5**

Date of Receipt

**07** / **16** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATHAN RIDDLE**

Mailing Address **387 TWIN CREEKS DR**

City **BOLINGBROOK** State **IL** Zip Code **60440**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BLUECAT**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126266**

Date of Receipt

**07** / **14** / **2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN A RIDER**

Mailing Address **3002 N GRANT ST**

City **ENID** State **OK** Zip Code **73703**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.126267**

Date of Receipt

**09** / **03** / **2015**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**700.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1394 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TIMOTHY RIEDEL**

Mailing Address 1305 DUCREST DRIVE SOUTH

City	State	Zip Code
COLUMBUS	OH	43220

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BAILEY CAVALIERI LLC

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126269**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**L. GEORGE RIEGER**

Mailing Address 28 HOME PLACE  
C 2

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GREENWICH INVESTMENT  
MANAGEMENT

Occupation  
WHITE COLLAR WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126271**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAY RIGGS**

Mailing Address 214 DABNEY DR

City	State	Zip Code
NEWPORT NEWS	VA	23602

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126273**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1395 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID RIKKERS**

Mailing Address **7 MATTHEW ST**

City State Zip Code  
**ANDOVER MA 01810**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RAYTHEON COMPANY**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126275**

Date of Receipt

**06 / 30 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ALAN RILEY**

Mailing Address **16 SMITH ROAD**

City State Zip Code  
**GOFFSTOWN NH 03045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**235.00**

**Transaction ID : SA17A.126276**

Date of Receipt

**08 / 19 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ALAN RILEY**

Mailing Address **16 SMITH ROAD**

City State Zip Code  
**GOFFSTOWN NH 03045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**260.00**

**Transaction ID : SA17A.126277**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**325.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1396 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAULA RIMEL**

Mailing Address 12627 CLOVERWOOD DR

City	State	Zip Code
CYPRESS	TX	77429

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ANADARKO PETROLEUM CORPORATION

Occupation  
LANDMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126279**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHILIP RINALDI**

Mailing Address 1097 WESTBROOK ROAD

City	State	Zip Code
BRIDGEWATER	NJ	08807

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHILADELPHIA ENERGY SOLUTIONS

Occupation  
CHAIRMAN/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126281**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN RINDLAUB**

Mailing Address 8441 SE 68TH ST. #217

City	State	Zip Code
MERCER ISLAND	WA	98040

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WELLS FARGO

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126283**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1397 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**S. RINDLAUB**

Mailing Address **8441 SE 68TH ST APT 217**

City	State	Zip Code
MERCER ISLAND	WA	98040

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126285**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ERIC RINESTONE**

Mailing Address **6001 E. CARON CIRCLE DRIVE**

City	State	Zip Code
PARADISE VALLEY	AZ	85253

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126287**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICK RIORDAN**

Mailing Address **E 601 BORLEY LN**

City	State	Zip Code
LIXEMBURG	WI	54217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NSIGHT**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126289**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1398 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT H RIPKEY**

Mailing Address 1021 TARRANT DR

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FONTANA PARTNERS INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126291**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERARD RIPO**

Mailing Address 1234 N LIME AVE

City	State	Zip Code
SARASOTA	FL	34237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126292**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GERARD RIPO**

Mailing Address 1234 N LIME AVE

City	State	Zip Code
SARASOTA	FL	34237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.126293**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1399 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERARD RIPO**

Mailing Address 1234 N LIME AVE

City	State	Zip Code
SARASOTA	FL	34237

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CARPENTER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

**Transaction ID : SA17A.126294**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MELISSA RIPPE**

Mailing Address 8378 BUTTERWORTH RD

City	State	Zip Code
MAINEVILLE	OH	45039

FEC ID number of contributing federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126296**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUSAN M RIPPINGER**

Mailing Address 11047 E VERBENA LN

City	State	Zip Code
SCOTTSDALE	AZ	85255

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHAPTER DEUX, LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126298**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1400 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SHARON RISK**

Mailing Address **113 ARBON LN**

City <b>NEW BERN</b>	State <b>NC</b>	Zip Code <b>28562</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**263.00**

**Transaction ID : SA17A.126300**

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

**263.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GERALD RISTE**

Mailing Address **12945 S. WHITE POTATO LAKE RD.**

City <b>POUND</b>	State <b>WI</b>	Zip Code <b>54161</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17A.126301**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN RIVARD**

Mailing Address **14910 FLOWERWOOD DR**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77062</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126303**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1013.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1401 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FERNANDO RIVERON**

Mailing Address 425 PINE RIDGE BLVD

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126305**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 14 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SEAN ROARK**

Mailing Address 1066 WINDCHIME WAY

City	State	Zip Code
PENSACOLA	FL	32503

FEC ID number of contributing federal political committee.

C

Name of Employer  
US NAVY

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126307**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RON ROBBINS**

Mailing Address 792 SE EVERGREEN DRIVE

City	State	Zip Code
LAKE CITY	FL	32025

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.126309**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1470.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1402 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WARREN M ROBBINS**

Mailing Address 10234 E SPRING CREEK RD

City	State	Zip Code
SUN LAKES	AZ	85248

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.126310**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WARREN M ROBBINS**

Mailing Address 10234 E SPRING CREEK RD

City	State	Zip Code
SUN LAKES	AZ	85248

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.00

**Transaction ID : SA17A.126311**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD ROBERTD**

Mailing Address 1650 SWAN LAKE RD

City	State	Zip Code
BOSSIER CITY	LA	71111

FEC ID number of contributing federal political committee.

C

Name of Employer  
VALVEWORKS USA

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126313**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1403 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BATSHEVA ROBERTS**

Mailing Address PO BOX 18

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

CHEMED

Occupation

MED. ASST.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126315**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BATSHEVA ROBERTS**

Mailing Address PO BOX 18

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

CHEMED

Occupation

MED. ASST.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126316**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BATSHEVA ROBERTS**

Mailing Address PO BOX 18

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

CHEMED

Occupation

MED. ASST.

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126317**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1404 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTOP B ROBERTS**

Mailing Address 1014 PRIORY PL

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SYSTEMS MADE SIMPLE**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126319**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOROTHY B ROBERTS**

Mailing Address 1970 LEMON RANCH RD

City	State	Zip Code
SANTA BARBARA	CA	93108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126321**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOROTHY B ROBERTS**

Mailing Address 1970 LEMON RANCH RD

City	State	Zip Code
SANTA BARBARA	CA	93108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126322**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1405 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DUANE ROBERTS**

Mailing Address 4100 NEWPORT PLACE D

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENTREPRENEURIAL CORPORATE**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126324**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DVORAH ROBERTS**

Mailing Address 120 ARBUTUS DRIVE

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126326**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

REATTRIBUTION; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DVORAH ROBERTS**

Mailing Address 120 ARBUTUS DRIVE

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126327**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1406 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DVORAH ROBERTS**

Mailing Address 120 ARBUTUS DRIVE

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126328**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GRADY ROBERTS**

Mailing Address 1800 WEST LOOP SOUTH, S

City	State	Zip Code
HOUSTON	TX	77027

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126330**

Date of Receipt

**09 / 11 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK ROBERTS**

Mailing Address 1110 WILSON HOLLOW ROAD

City	State	Zip Code
WAITSBURG	WA	99361

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126332**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1407 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KELLY ROBERTS**

Mailing Address 4100 NEWPORT PLACE D

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENTREPRENEURIAL CORPORATE**

Occupation  
**VICE CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126334**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LON E ROBERTS**

Mailing Address 1807 MAPLE HILL RD

City	State	Zip Code
WAUSAU	WI	54403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RUDER WARE LLC**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126336**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL M ROBERTS**

Mailing Address 530 OLD WAUSAU ROAD

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ROBERTS IRRIGATION CO.**

Occupation  
**SELF-EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126338**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1408 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL M ROBERTS**

Mailing Address 530 OLD WAUSAU ROAD

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROBERTS IRRIGATION CO.

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.126339**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL M ROBERTS**

Mailing Address 530 OLD WAUSAU ROAD

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROBERTS IRRIGATION CO.

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126339.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAWN ROBERTS**

Mailing Address 530 OLD WAUSAU ROAD

City	State	Zip Code
STEVENS POINT	WI	54481

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126339.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1409 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD ROBERTS**

Mailing Address PO BOX 18

City LAKEWOOD	State NJ	Zip Code 08701
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.126341**

Date of Receipt

**09 / 03 / 2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD ROBERTS**

Mailing Address PO BOX 18

City LAKEWOOD	State NJ	Zip Code 08701
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126342**

Date of Receipt

**09 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD ROBERTS**

Mailing Address PO BOX 18

City LAKEWOOD	State NJ	Zip Code 08701
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126343**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1410 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD ROBERTS**

Mailing Address PO BOX 18

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126344**

Date of Receipt

**09 / 03 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RIVKA ROBERTS**

Mailing Address PO BOX 18

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126346**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RIVKA ROBERTS**

Mailing Address PO BOX 18

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126347**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1411 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RIVKA ROBERTS**

Mailing Address **PO BOX 18**

City State Zip Code  
**LAKEWOOD NJ 08701**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126348**

Date of Receipt

**09 / 03 / 2015**

**REDESIGNATED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WALTER B ROBERTS**

Mailing Address **1299 BLACK OAKS CT N**

City State Zip Code  
**PLYMOUTH MN 55447**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126350**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WALTER B ROBERTS**

Mailing Address **1299 BLACK OAKS CT N**

City State Zip Code  
**PLYMOUTH MN 55447**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126351**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1412 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER B ROBERTS**

Mailing Address 1299 BLACK OAKS CT N

City	State	Zip Code
PLYMOUTH	MN	55447

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.126352**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**Yael ROBERTS**

Mailing Address PO BOX 18

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126354**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**Yael ROBERTS**

Mailing Address PO BOX 18

City	State	Zip Code
LAKEWOOD	NJ	08701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126355**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5600.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1413 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**Yael Roberts**

Mailing Address PO BOX 18

City State Zip Code  
LAKEWOOD NJ 08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126356**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 03 / 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**Mary Robertson**

Mailing Address 28 JEWETT HILL RD

City State Zip Code  
SHARON CT 06069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126358**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**Rex F Robertson**

Mailing Address 6535 BANDERA AVENUE, APT 1E

City State Zip Code  
DALLAS TX 75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD II, LTD.

Occupation  
GENERAL PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126360**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1414 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM ROBERTSON**

Mailing Address 6201 AUTO CLUB RD

City	State	Zip Code
BLOOMINGTON	MN	55438

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126361**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM ROBICHAUD**

Mailing Address 187 WEST ST

City	State	Zip Code
READING	MA	01867

FEC ID number of contributing federal political committee.

C

Name of Employer  
COLLABORATIVE CONSULTING, LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126363**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERNARD M ROBINSON**

Mailing Address 1332 VERMONT AVENUE SW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

C

Name of Employer  
BRM, INC.

Occupation  
REALTY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126365**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1415 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL ROBINSON**

Mailing Address 15453 ELM BLUFF WAY

City	State	Zip Code
ROANOKE	TX	76262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

**Transaction ID : SA17A.126366**

Date of Receipt

MM / DD / YYYY  
08 / 11 / 2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL ROBINSON**

Mailing Address 15453 ELM BLUFF WAY

City	State	Zip Code
ROANOKE	TX	76262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

**Transaction ID : SA17A.126367**

Date of Receipt

MM / DD / YYYY  
08 / 11 / 2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL ROBINSON**

Mailing Address 15453 ELM BLUFF WAY

City	State	Zip Code
ROANOKE	TX	76262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.126368**

Date of Receipt

MM / DD / YYYY  
08 / 17 / 2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

60.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1416 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL ROBINSON**

Mailing Address 15453 ELM BLUFF WAY

City	State	Zip Code
ROANOKE	TX	76262

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

**Transaction ID : SA17A.126369**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Amount of Each Receipt this Period

25.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL ROBINSON**

Mailing Address 15453 ELM BLUFF WAY

City	State	Zip Code
ROANOKE	TX	76262

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

**Transaction ID : SA17A.126370**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE ROBINSON**

Mailing Address 5005 RIVERWAY #200

City	State	Zip Code
HOUSTON	TX	77056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ANDERSON ROBINSON

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126372**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1417 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANICE ROBINSON**

Mailing Address **27 ST. JAMES PARK**

City	State	Zip Code
LOS ANGELES	CA	90007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126373**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LONNY ROBISON**

Mailing Address **337 E. LAUREL DRIVE**

City	State	Zip Code
SALINAD	CA	93906

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INNS OF MONTEREY**

Occupation  
**CHIEF ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126375**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LONNY ROBISON**

Mailing Address **337 E. LAUREL DRIVE**

City	State	Zip Code
SALINAD	CA	93906

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INNS OF MONTEREY**

Occupation  
**CHIEF ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.126376**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1418 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHELLE ROBSON**

Mailing Address 3104 EAST CAMELBACK ROAD, #837

City	State	Zip Code
PHEONIX	AZ	85016

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126378**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PERRY ROCHESTER**

Mailing Address 238 SETTLERS POINT DRIVE

City	State	Zip Code
CLARKESVILLE	GA	30523

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126379**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK RODACK**

Mailing Address 16051 COLLINS AVE  
3

City	State	Zip Code
SUNNY ISLES B	FL	33160

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126381**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1419 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS H RODDIS**

Mailing Address 4920 ARDEN AVENUE

City	State	Zip Code
EDINA	MN	55424

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126383**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY RODRIGUEZ**

Mailing Address 3321 CALDEIRA DR.

City	State	Zip Code
LIVERMORE	CA	94550

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LEADERMETRIX INC.

Occupation  
PRESIDENT OF A CONSULTING COMPANY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126385**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HAN ROEBBELEN**

Mailing Address 2611 SEEBLICK COURT

City	State	Zip Code
EL DORADO HILLS	CA	95762

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.126387**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

275.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1775.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1420 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EVERETT ROEHL**

Mailing Address **11574 N GALVIN AVE**

City <b>MARSHFIELD</b>	State <b>WI</b>	Zip Code <b>54449</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROEHL TRANSPORT**

Occupation  
**FOUNDER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126389**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES ROELKE**

Mailing Address **5008 MIRANDY ROSE CT**

City <b>MIDDLETON</b>	State <b>WI</b>	Zip Code <b>53562</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126391**

Date of Receipt

M M / D D / Y Y Y Y
07 / 25 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDY M ROGERS**

Mailing Address **2525 RICHERT AVE.**

City <b>CLOVIS</b>	State <b>CA</b>	Zip Code <b>93611</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VOCATION PLUS SERVICES INC.**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126392**

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**900.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1421 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JUDY M ROGERS**

Mailing Address **2525 RICHERT AVE.**

City	State	Zip Code
CLOVIS	CA	93611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VOCATION PLUS SERVICES INC.**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126393**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NORMAN ROGERS**

Mailing Address **3750 S LAS VEGAS BLVD**

City	State	Zip Code
LAS VEGAS	NV	89158

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126395**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PAUL ROGERS**

Mailing Address **1696 AVONDALE DRIVE**

City	State	Zip Code
ROSEVILLE	CA	95747

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE DEVELOPER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126397**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3250.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1422 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MAURICE ROGERSON**

Mailing Address PO BOX 412

City State Zip Code  
POTLATCH ID 83855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELINC.COM

Occupation  
TECHNICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126398**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ROBIN G ROGERSON**

Mailing Address 3848 JENNINGS ST

City State Zip Code  
SAN DIEGO CA 92106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GARDEN COMMUNITIES SAN DIEGO

Occupation  
PROJECT ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126400**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH J ROHLING**

Mailing Address 4403 BROOK COURT

City State Zip Code  
WESTON WI 54476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ST.CLAIRE'S

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126402**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1423 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES E ROHR**

Mailing Address **613 DORSEYVILLE RD**

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.126404**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES E ROHR**

Mailing Address **613 DORSEYVILLE RD**

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126405**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHARON ROHR**

Mailing Address **613 DORSEYVILLE RD**

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126407**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

REATTRIBUTED

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5000.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1424 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEBORAH ROHRKASTE**

Mailing Address **1417 MAHLER BOULEVARD**

City <b>NEENAH</b>	State <b>WI</b>	Zip Code <b>54956</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CALVARY BIBLE CHURCH**

Occupation  
**CHILDRENS MINISTRY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126409**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VINCENT ROLDAN**

Mailing Address **49 N 8TH STREET APT 4F**

City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11249</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BALLON STOLL BADER & NADLER**

Occupation  
**LAWYER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126411**

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID ROLSTON**

Mailing Address **8411 N. INDIAN CREEK PARKWAY**

City <b>MILWAUKEE</b>	State <b>WI</b>	Zip Code <b>53217</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HATCO CORPORATION**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126413**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1425 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS ROMANO**

Mailing Address **92 NEWFIELD DRIVE**

City	State	Zip Code
<b>STAMFORD</b>	<b>CT</b>	<b>06905</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126415**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>03</b>		<b>2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KARYN ROMANO**

Mailing Address **647 EUCLID AVENUE**

City	State	Zip Code
<b>GLEN ELLYN</b>	<b>IL</b>	<b>60137</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126417**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>14</b>		<b>2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RITA ROMANO**

Mailing Address **70 NEWFIELD DRIVE**

City	State	Zip Code
<b>STAMFORD</b>	<b>CT</b>	<b>06905</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126419**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>03</b>		<b>2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1426 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHEAL ROMPEL**

Mailing Address 3259 KOAPAKA ST. #B

City	State	Zip Code
HONOLULU	HI	96819

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
POSSO PIZZA INC.

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126421**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHEAL ROMPEL**

Mailing Address 3259 KOAPAKA ST. #B

City	State	Zip Code
HONOLULU	HI	96819

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
POSSO PIZZA INC.

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126422**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHEAL ROMPEL**

Mailing Address 3259 KOAPAKA ST. #B

City	State	Zip Code
HONOLULU	HI	96819

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
POSSO PIZZA INC.

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126422.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KARLA ROMPEL**

Mailing Address 3259 KOAPAKA ST. #B

City	State	Zip Code
HONOLULU	HI	96819

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126422.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		22		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA ROSAASEN**

Mailing Address 30763 E SUNSET DR S

City	State	Zip Code
REDLANDS	CA	92373

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROSAASEN CORPORATION

Occupation  
INTERIOR DESIGNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126424**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CRAIG ROSAND**

Mailing Address 1701 WYOMING AVE

City	State	Zip Code
SUPERIOR	WI	54880

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
US HOUSE OF REPRESENTATIVES - REP.  
SEA

Occupation  
CONGRESSIONAL AIDE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126426**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRAD ROSE**

Mailing Address 2006 LAKE END ROAD

City	State	Zip Code
MERRICK	NY	11566

FEC ID number of contributing federal political committee.

C

Name of Employer  
PRYOR CASHMAN LLP

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126428**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARRIE ROSE**

Mailing Address 7 STACY STREET

City	State	Zip Code
HAROLD	KY	41635

FEC ID number of contributing federal political committee.

C

Name of Employer  
DRUG STORE

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126430**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LESLIE ROSE**

Mailing Address 330 S OCEAN BLVD APT 3B

City	State	Zip Code
PALM BEACH	FL	33480

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126432**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1429 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRENCE ROSE**

Mailing Address 3375 SCOTT BOULEVARD

City	State	Zip Code
SANTA CLARA	CA	95054

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TERRENCE J. ROSE INC**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126434**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEOFFREY ROSENBERGER**

Mailing Address 7 LILY POND LANE

City	State	Zip Code
PITTSFORD	NY	14534

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LILY POND VENTURES, LLC**

Occupation  
**INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126436**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAY ROSENHECK**

Mailing Address 7755 N SPALDING LAKE

City	State	Zip Code
ATLANTA	GA	30350

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JAY L ROSENHECK DDS PC**

Occupation  
**DENTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126438**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEANNA ROSS**

Mailing Address 1503 SILVERLAKE ROAD

City	State	Zip Code
MCKINNEY	TX	75070

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NONE

Occupation  
HOUSEWIFE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126440**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDY ROSS**

Mailing Address 800 PENDLETON DR

City	State	Zip Code
SALEM	VA	24153

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LAYMAN CANDY CO INC

Occupation  
SEC-TREAS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126442**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL ROSS**

Mailing Address 1015 ARCHER ST

City	State	Zip Code
SAN DIEGO	CA	92109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PB CONSULTING

Occupation  
COUNTY PLANNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126444**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES ROTH**

Mailing Address 302 NORTH 4TH STREET

City	State	Zip Code
SAINT JOSEPH	MO	64501

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HILLYARD INDUSTRIES

Occupation  
EX VP & GM

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126446**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARILYN ROTH**

Mailing Address 2296 E SPURWIND LN

City	State	Zip Code
GREEN VALLEY	AZ	85614

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126448**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY B ROTH**

Mailing Address 8545 CARMEL VALLEY R

City	State	Zip Code
CARMEL	CA	93923

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126450**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1432 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY B ROTH**

Mailing Address 8545 CARMEL VALLEY R

City	State	Zip Code
CARMEL	CA	93923

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.126451**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY B ROTH**

Mailing Address 8545 CARMEL VALLEY R

City	State	Zip Code
CARMEL	CA	93923

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126451.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY B ROTH**

Mailing Address 8545 CARMEL VALLEY R

City	State	Zip Code
CARMEL	CA	93923

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

**Transaction ID : SA17A.126451.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/7/2015

Amount of Each Receipt this Period

500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 1433 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RORY ROTTSCHALK**

Mailing Address 609 WALNUTSHIRE LN

City	State	Zip Code
CHICO	CA	95973

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CULP & TANNER, INC

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126453**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RORY ROTTSCHALK**

Mailing Address 609 WALNUTSHIRE LN

City	State	Zip Code
CHICO	CA	95973

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CULP & TANNER, INC

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

**Transaction ID : SA17A.126454**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROGER ROYSE**

Mailing Address 1712 EMBARCADERO RD

City	State	Zip Code
PALO ALTO	CA	94303

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROYSE LAW FIRM

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126456**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1434 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PHILLIP ROZELL**

Mailing Address PO BOX 1682

City

FAYETTEVILLE

State

AR

Zip Code

72702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126458**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TYE RUBINS**

Mailing Address 2073 SUNSET PLAZA DRIVE

City

LOS ANGELES

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.126459**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT A RUCHO**

Mailing Address 305 TRAFALGAR PLACE

City

MATTHEWS

State

NC

Zip Code

28105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

DENTIST

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126461**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1435 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT A RUCHO**

Mailing Address 305 TRAFALGAR PLACE

City	State	Zip Code
MATTHEWS	NC	28105

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
DENTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126462**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THERESA RUCHO**

Mailing Address 305 TRAFALGAR PLACE

City	State	Zip Code
MATTHEWS	NC	28105

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126464**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID L RUDOLPH**

Mailing Address 8319 E CALLE DE ALEGRIA

City	State	Zip Code
SCOTTSDALE	AZ	85255

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126466**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1436 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL E RUEDEBUSCH**

Mailing Address 133 MEADOW RIDGE LN

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RDC NATIONAL INC

Occupation  
PRESIDENT & CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126468**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM J RUETZ**

Mailing Address 5638 INDEPENDENCE ROAD

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126470**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHARON RUGGLES**

Mailing Address 1321 SAINT ANDREWS R

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126472**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1437 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE M RUHL**

Mailing Address **4981 TRILLIUM TRAIL**

City	State	Zip Code
LONG GROVE	IL	60047

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126474**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address **6910 BONHEIM CT**

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CSIS**

Occupation  
**SCHOLAR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126476**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address **6910 BONHEIM CT**

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CSIS**

Occupation  
**SCHOLAR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126484**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**8100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1438 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126484.0**

Date of Receipt

**06 / 18 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126484.1**

Date of Receipt

**06 / 18 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.126477**

Date of Receipt

**07 / 31 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1439 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.126477.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.126477.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.126478**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1440 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.126478.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL RUNDE**

Mailing Address 6910 BONHEIM CT

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CSIS

Occupation  
SCHOLAR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.126478.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES RUNDE**

Mailing Address 1621 GASPAR DRIVE SOUTH

City	State	Zip Code
BOCA GRANDE	FL	33921

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MORGAN STANLEY

Occupation  
MANAGING DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126480**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1441 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD RUNDE**

Mailing Address **606 WEST 12TH STREET**

City	State	Zip Code
AUSTIN	TX	78701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**QUICK & COMPANY**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126482**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT RUPP**

Mailing Address **2320 PLAZA DEL GRAND**

City	State	Zip Code
LAS VEGAS	NV	89102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DRAKE EQUIPMENT**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.126485**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		30		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALLEN RUSHTON**

Mailing Address **94 COUNTRY CLUB BLVD**

City	State	Zip Code
MOUNTAIN BRK	AL	35213

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.126487**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

**350.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1442 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT RUSIS**

Mailing Address **415 LABRADOR TRL**

City <b>MULLICA HILL</b>	State <b>NJ</b>	Zip Code <b>08062</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126489**

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HOWARD RUSKIN**

Mailing Address **555 SKOKIE BOUELVARD**

City <b>NORTHBROOK</b>	State <b>IL</b>	Zip Code <b>60062</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126491**

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID S RUSSELL**

Mailing Address **2113 WILSHIRE DR**

City <b>ENID</b>	State <b>OK</b>	Zip Code <b>73703</b>
---------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126493**

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1443 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGANN RUSSELL**

Mailing Address P.O. BOX 1158

City	State	Zip Code
NEVADA CITY	CA	95959

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
G. RUSSELL ENTERPRISES, LTD

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126495**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**H.S. RUSSELL**

Mailing Address P.O. BOX 1907

City	State	Zip Code
WILSON	WY	83014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126497**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WAYNE RUSSELL**

Mailing Address 4120 DOUGLAS BOULEVARD STE 306 PMB

City	State	Zip Code
GRANITE BAY	CA	95746

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.126499**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1203.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1444 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY RUST**

Mailing Address 250 BIRDSONG LN

City	State	Zip Code
CAPE GIRARDEA	MO	63701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CONCORD PUBLISHING HOUSE INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126501**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA RUST**

Mailing Address PO BOX 2817

City	State	Zip Code
LABELLE	FL	33975

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126503**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GERALD RUTLEDGE**

Mailing Address 1290 BOYCE RD APT C212

City	State	Zip Code
PITTSBURGH	PA	15241

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126505**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1445 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RON RUTLEDGE**

Mailing Address 1671 W FM 550

City	State	Zip Code
ROCKWALL	TX	75032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126507**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RON RUTLEDGE**

Mailing Address 1671 W FM 550

City	State	Zip Code
ROCKWALL	TX	75032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.126508**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN J RUUD**

Mailing Address 98 SAN JACINTO BOULEVARD FSR3000

City	State	Zip Code
AUSTIN	TX	78701

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126510**

Date of Receipt

**08 / 05 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1446 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN WILLIAMS RY**

Mailing Address 2534 LOMBARD

City

JANESVILLE

State

WI

Zip Code

53545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NORTHLAND EQUIPMENT CO INC

Occupation

PRESIDENT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126512**

Date of Receipt

07

08

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARTHUR RYAN**

Mailing Address 119 MOUNT PLEASANT A

City

GLOUCESTER

State

MA

Zip Code

01930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126514**

Date of Receipt

07

17

2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHERYL A RYAN**

Mailing Address 3820 S SUNNY RIDGE LN

City

NEW BERLIN

State

WI

Zip Code

53151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126516**

Date of Receipt

09

02

2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1447 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN RYAN**

Mailing Address **27PINEVIEW DRIVE**

City <b>BREWSTER</b>	State <b>NY</b>	Zip Code <b>10509</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126518**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID R RYDELL**

Mailing Address **1540 N MULFORD ROAD**

City <b>ROCKFORD</b>	State <b>IL</b>	Zip Code <b>61107</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126520**

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARRY RYDSTROM**

Mailing Address **100 ADAMS AVE**

City <b>PITTSBURGH</b>	State <b>PA</b>	Zip Code <b>15243</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126522**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1448 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA RYLAND**

Mailing Address **PO BOX 20036**

City **WICKENBURG** State **AZ** Zip Code **85358**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126524**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RONALD RYMAS**

Mailing Address **4273 KENSINGTON WAY**

City **ROCKTON** State **IL** Zip Code **61072**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ROCKRANGER LLC**

Occupation  
**DIRECTOR OF FUELS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126526**

Date of Receipt

**07 / 07 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM SABATINO**

Mailing Address **5808 GLEN HAVEN DRIVE**

City **GREENDALE** State **WI** Zip Code **53129**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126528**

Date of Receipt

**07 / 18 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1449 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOSEPH L SACHEN**

Mailing Address PO BOX 643

City  
**AURORA**

State Zip Code  
**IL 60507**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126530**

Date of Receipt

**09 / 21 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD SACKLER**

Mailing Address 14 CICERO LANE

City  
**AUSTIN**

State Zip Code  
**TX 78746**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MUNDIPHARMA GMBH**

Occupation  
**DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126532**

Date of Receipt

**06 / 23 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS SAFRAN**

Mailing Address 11812 SAN VICENTE BOULEVARD, SUITE

City  
**LOS ANGELES**

State Zip Code  
**CA 90049**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126534**

Date of Receipt

**09 / 18 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1450 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY V SAGUI**

Mailing Address 1301 SAINT ANDREWS RD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TEMPLAR SECURITIES**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126536**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY V SAGUI**

Mailing Address 1301 SAINT ANDREWS RD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TEMPLAR SECURITIES**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128860**

Date of Receipt

**08 / 18 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAUREEN SAGUI**

Mailing Address 1301 SAINT ANDREWS RD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128862**

Date of Receipt

**08 / 18 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1451 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**HAGEN SAHM**

Mailing Address **8828 KELSEY DR.**

City	State	Zip Code
ELK GROVE	CA	95624

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
SACRAMENTO MUNICIPAL UTILITY DISTRICT	ELECT ENGR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126538**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ORLANDO SALAZAR**

Mailing Address **4445 ARCADY AVENUE**

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126540**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARK SALM**

Mailing Address **3030 HERMANS RD**

City	State	Zip Code
NEW FRANKEN	WI	54229

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
SALM PARTNERS, LLC	PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126542**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1452 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TOM SALOME**

Mailing Address P.O. BOX 1175

City	State	Zip Code
WACO	TX	76703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126544**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STUART SALOT**

Mailing Address 29135 WARNICK RD.

City	State	Zip Code
RANCHO PALOS VERDES	CA	90275

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126546**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**IRWIN SAMELMAN**

Mailing Address 89 PRINCEVILLE LN

City	State	Zip Code
LAS VEGAS	NV	89113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126548**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1453 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES A SAMMONS**

Mailing Address 1000 RIVER RANCH RD

City	State	Zip Code
ALEDO	TX	76008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1060.00

**Transaction ID : SA17A.126549**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**COLLETTE SAMSEL**

Mailing Address 175 PECUNIT STREET

City	State	Zip Code
CANTON	MA	20201

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128712**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERVEN SAMSEL**

Mailing Address 175 PECUNIT STREET

City	State	Zip Code
CANTON	MA	20201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126551**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1454 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ERVEN SAMSEL**

Mailing Address **175 PECUNIT STREET**

City	State	Zip Code
CANTON	MA	20201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSUTLANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128710**

Date of Receipt

**07 / 20 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL SAMSON**

Mailing Address **619 47TH AVENUE**

City	State	Zip Code
SAN FRANCISCO	CA	94121

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MICHAEL SAMSON CO.**

Occupation  
**PROPERTY MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126553**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DARLENE SANCHEZ**

Mailing Address **239 E 9585 SOUTH**

City	State	Zip Code
SANDY	UT	84070

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126554**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1100.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1455 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DARLENE SANCHEZ**

Mailing Address 239 E 9585 SOUTH

City	State	Zip Code
SANDY	UT	84070

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126555**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL SANDERS**

Mailing Address 37170 HOT SPRINGS DRIVE

City	State	Zip Code
PORTERVILLE	CA	93257

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126557**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**COLBY B SANDLIAN**

Mailing Address 435 N BROADWAY AVE

City	State	Zip Code
WICHITA	KS	67202

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126559**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1456 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA SANDOR**

Mailing Address **400 S STEELE ST**

City	State	Zip Code
DENVER	CO	80209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.126561**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			03			2015			

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED SANDS**

Mailing Address **11611 SAN VICENTE BOULEVARD, SUITE**

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126563**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED SANDS**

Mailing Address **11611 SAN VICENTE BOULEVARD, SUITE**

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128804**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5603.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1457 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED SANDS**

Mailing Address 11611 SAN VICENTE BOULEVARD, SUITE

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128805**

Date of Receipt

**09 / 01 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT SANFILIPPO**

Mailing Address PO BOX 98

City	State	Zip Code
ROSLYN HEIGHTS	NY	11577

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126565**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ARVIND SANGER**

Mailing Address 170 E END AVENUE, 19B

City	State	Zip Code
NEW YORK	NY	10128

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126567**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1458 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID SAPORTA**

Mailing Address 11706 MANDA DR

City	State	Zip Code
HUNTLEY	IL	60142

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROAD RANGER LLC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126569**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREGORY SARNO**

Mailing Address 668 HERITAGE WAY

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ENVIRONMENTAL ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126571**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED SAUER**

Mailing Address 454 HAMMERSMITH RD

City	State	Zip Code
SAINT LOUIS	MO	63141

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ORION INVESTMENT CO

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126573**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1459 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY SAUER**

Mailing Address 2886 HIGHWAY N

City

PERRYVILLE

State

MO

Zip Code

63775

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126575**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**W. R. SAUEY**

Mailing Address S3747 CTY TRUNK T

City

BARABOO

State

WI

Zip Code

53913

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126577**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL SAUN**

Mailing Address 13435 W 60TH PL

City

ARVADA

State

CO

Zip Code

80004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126579**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1460 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RUTH SAUTER**

Mailing Address **255 TRADERS POINT LANE**

City <b>GREEN BAY</b>	State <b>WI</b>	Zip Code <b>54302</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126581**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT SAVINO**

Mailing Address **280 PARK AVENUE SOUTH, APT 10H**

City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10010</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BLANK ROME LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.126583**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

**750.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID SAWICKI**

Mailing Address **11775 BROOKE LYN COURT**

City <b>CONCORD TOWNS</b>	State <b>OH</b>	Zip Code <b>44077</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CLEVELAND CONSTRUCTION INC.**

Occupation  
**VICE PRESIDENT OF CONSTRUCTION**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126585**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2750.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1461 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD SAYLER**

Mailing Address 13033 RIDGEDALE DRIVE, #182

City	State	Zip Code
MINNETONKA	MN	55305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DONLAD CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.126586**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD SAYLER**

Mailing Address 13033 RIDGEDALE DRIVE, #182

City	State	Zip Code
MINNETONKA	MN	55305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DONLAD CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.00

**Transaction ID : SA17A.126587**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD SAYLER**

Mailing Address 13033 RIDGEDALE DRIVE, #182

City	State	Zip Code
MINNETONKA	MN	55305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DONLAD CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

535.00

**Transaction ID : SA17A.126588**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

335.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1462 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD SAYLER**

Mailing Address 13033 RIDGEDALE DRIVE, #182

City	State	Zip Code
MINNETONKA	MN	55305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DONLAD CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

635.00

**Transaction ID : SA17A.126589**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD SAYLER**

Mailing Address 13033 RIDGEDALE DRIVE, #182

City	State	Zip Code
MINNETONKA	MN	55305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DONLAD CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

685.00

**Transaction ID : SA17A.126590**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD SAYLER**

Mailing Address 13033 RIDGEDALE DRIVE, #182

City	State	Zip Code
MINNETONKA	MN	55305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DONLAD CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

785.00

**Transaction ID : SA17A.126591**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1463 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVE SAZAMA**

Mailing Address 5539 W.STATE ST.

City	State	Zip Code
MILWAUKEE	WI	53208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126593**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANTHONY SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
CO-MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126595**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
CO-MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126595.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1464 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEIDRE SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126595.1**

Date of Receipt

**06** / **19** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANTHONY SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
CO-MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.126596**

Date of Receipt

**07** / **31** / **2015**

SEE REDESIGNATION & REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
CO-MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126596.0**

Date of Receipt

**07** / **31** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1465 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEIDRE SCARAMUCCI**

Mailing Address **17 PARKWOODS RD**

City <b>MANHASSET</b>	State <b>NY</b>	Zip Code <b>11030</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126596.1**

Date of Receipt

**07 / 31 / 2015**

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEIDRE SCARAMUCCI**

Mailing Address **17 PARKWOODS RD**

City <b>MANHASSET</b>	State <b>NY</b>	Zip Code <b>11030</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126596.2**

Date of Receipt

**07 / 31 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEIDRE SCARAMUCCI**

Mailing Address **17 PARKWOODS RD**

City <b>MANHASSET</b>	State <b>NY</b>	Zip Code <b>11030</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126596.3**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**0.00**

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1466 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****ANTHONY SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SKYBRIDGE CAPITALOccupation  
CO-MANAGING PARTNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126596.4**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item**B. Full Name (Last, First, Middle Initial)****ANTHONY SCARAMUCCI**

Mailing Address 17 PARKWOODS RD

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SKYBRIDGE CAPITALOccupation  
CO-MANAGING PARTNER

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126596.5**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item**C. Full Name (Last, First, Middle Initial)****DAVID A SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
SECURITIES TRADER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.126601**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

SEE REATTRIBUTION &amp; REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

10800.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1467 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID A SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SECURITIES TRADER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126602**

Date of Receipt

**07 / 31 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID A SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SECURITIES TRADER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126603**

Date of Receipt

**07 / 31 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID A SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SECURITIES TRADER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126604**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1468 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REBECCA SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126608**

Date of Receipt

**07 / 31 / 2015**

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**REBECCA SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126609**

Date of Receipt

**07 / 31 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REBECCA SCARAMUCCI**

Mailing Address 177 BOURNDALE RD N

City	State	Zip Code
MANHASSET	NY	11030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126610**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1469 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA SCARBROUGH**

Mailing Address 508 BLACKHAWK CLUB DRIVE

City	State	Zip Code
DANVILLE	CA	94506

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.126612**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

203.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SCEPANSKI**

Mailing Address 455 E MORGAN AVENUE

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126614**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN SCEPANSKI**

Mailing Address 455 E MORGAN AVENUE

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126615**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1203.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1470 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN SCEPANSKI**

Mailing Address 455 E MORGAN AVENUE

City	State	Zip Code
MILWAUKEE	WI	53207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.126616**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL SCHABEN**

Mailing Address PO BOX 767

City	State	Zip Code
CARROLL	IA	51401

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOT SPRINGS SPA

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126618**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			10			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LEAH SCHAEFER**

Mailing Address 9924 WELLINGTON WAY

City	State	Zip Code
FORT SMITH	AR	72908

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.00

**Transaction ID : SA17A.126619**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			07			2015			

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1203.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1471 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LEE SCHAFER**

Mailing Address 1469 RED CLIFF WAY

City	State	Zip Code
CASTLE ROCK	CO	80109

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126621**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD SCHAFFNER**

Mailing Address P.O. BOX 2145

City	State	Zip Code
RANCHO MIRAGE	CA	92270

FEC ID number of contributing federal political committee.

C

Name of Employer  
INDEPENDENT CONTRACTOR

Occupation  
DENTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.126622**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD SCHAFFNER**

Mailing Address P.O. BOX 2145

City	State	Zip Code
RANCHO MIRAGE	CA	92270

FEC ID number of contributing federal political committee.

C

Name of Employer  
INDEPENDENT CONTRACTOR

Occupation  
DENTIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126623**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1472 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD SCHAFFNER**

Mailing Address P.O. BOX 2145

City	State	Zip Code
RANCHO MIRAGE	CA	92270

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INDEPENDENT CONTRACTOR**

Occupation  
**DENTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

603.00

**Transaction ID : SA17A.126624**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

103.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ARTHUR SCHALLER**

Mailing Address 51 FERRY RD

City	State	Zip Code
CHESTER	CT	06412

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126626**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FREDERICK SCHALLER**

Mailing Address 10 CHURCH STREET

City	State	Zip Code
NATICK	MA	01760

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126628**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

603.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1473 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SHIRLEE SCHAMS**

Mailing Address **N1959 HILLVIEW DR**

City <b>LA CROSSE</b>	State <b>WI</b>	Zip Code <b>54601</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126630**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**W.M. SCHAMS**

Mailing Address **N1959 HILLVIEW DR**

City <b>LA CROSSE</b>	State <b>WI</b>	Zip Code <b>54601</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126632**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARJORIE SCHAPER**

Mailing Address **2425 COLE WOOD COURT**

City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46239</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.126634**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**350.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1350.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1474 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GILBERT SCHARF**

Mailing Address 733 3RD AVENUE, 16TH FLOOR

City	State	Zip Code
NEW YORK	NY	10017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126636**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GILBERT SCHARF**

Mailing Address PO BOX 159

City	State	Zip Code
CLINTON CORNE	NY	12514

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GILDALE ADISORS LLC**

Occupation  
**INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126638**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL SCHARF**

Mailing Address 225 DUNBAR ROAD

City	State	Zip Code
PALM BEACH	FL	33480

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126640**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1475 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN SCHARLAU**

Mailing Address **N6938 810TH STREET**

City	State	Zip Code
ELK MOUND	WI	54739

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RENTALS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126642**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SCHAUPP**

Mailing Address **229 ROSEMONT DRIVE**

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126644**

Date of Receipt

**08 / 09 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY SCHAUPP**

Mailing Address **225 ROSEMONT DRIVE**

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126646**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1476 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT J SCHAUPP**

Mailing Address PO BOX 12737

City	State	Zip Code
GREEN BAY	WI	54307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**P & S INVESTMENTS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126648**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NICHOLAS SCHAUS**

Mailing Address 307 SABLE OAK DR

City	State	Zip Code
VERO BEACH	FL	32963

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SYZGY LTD**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126650**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BILLIE F. SCHAUWECKER**

Mailing Address 27172 HUEY LANE  
0

City	State	Zip Code
EUGENE	OR	97402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.126651**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1325.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1477 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN J SCHECHINGE**

Mailing Address 1575 MESA DRIVE

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126653**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			15			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVE SCHEEL**

Mailing Address 3900 RIVER OAK CIRCLE

City	State	Zip Code
MOORHEAD	MN	56560

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STEVE D. SCHEEL

Occupation  
RETAIL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126655**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH SCHELLER**

Mailing Address 2278 BOBBY CT

City	State	Zip Code
OREFIELD	PA	18069

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126657**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1478 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL SCHIAPPA**

Mailing Address 48 ROSEWELL ROAD

City	State	Zip Code
BEDFORD	NH	03110

FEC ID number of contributing federal political committee.

C

Name of Employer  
SOPHOS, INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126659**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GAIL SCHICKEDANZ**

Mailing Address 6758 WILSON RD.

City	State	Zip Code
WEST PALM BEACH	FL	33413

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126661**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GOERGE SCHIELE**

Mailing Address 19 HILL ROAD

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126663**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1479 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**IVELY SCHIFFMACH**

Mailing Address 372 N SMITH AVE

City	State	Zip Code
CORONA	CA	92880

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PRICE MFG COMPANY**

Occupation  
**ACCOUNTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126665**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DEAN SCHILLING**

Mailing Address 9120 PATTERSON ST.

City	State	Zip Code
SAINT JOHN	IN	46373

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126667**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HUGH K SCHILLING**

Mailing Address 16907 E MONTEREY DRIVE

City	State	Zip Code
FOUNTAIN HILL	AZ	85268

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HORTON HOLDING**

Occupation  
**CHM**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126669**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1480 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HUGH K SCHILLING**

Mailing Address **16907 E MONTEREY DRIVE**

City <b>FOUNTAIN HILL</b>	State <b>AZ</b>	Zip Code <b>85268</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HORTON HOLDING**

Occupation  
**CHM**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126669.0**

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET SCHILLING**

Mailing Address **16907 E MONTEREY DRIVE**

City <b>FOUNTAIN HILLS</b>	State <b>AZ</b>	Zip Code <b>85268</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126669.1**

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS SCHINKE**

Mailing Address **W4792 WILLOW BEND ROAD**

City <b>ELKHORN</b>	State <b>WI</b>	Zip Code <b>53121</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126671**

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1481 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN E SCHLANG**

Mailing Address **31 OUTBACK LANE**

City	State	Zip Code
NORTHWOOD	NH	03261

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126672**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID SCHLAPMAN**

Mailing Address **15565 POMONA RD**

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FORRER BUSINESS INTERIORS

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126674**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW SCHLEI**

Mailing Address **4352 LYCEUM AVENUE**

City	State	Zip Code
LOS ANGELES	CA	90066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SONY PICTURES ENT

Occupation  
IT EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

**Transaction ID : SA17A.126675**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	5

Amount of Each Receipt this Period

165.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

515.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1482 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NORBERT SCHLICHTER**

Mailing Address 14850 646TH AVENUE

City	State	Zip Code
ADAMS	MN	55909

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126677**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 03 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARL SCHLOTMAN**

Mailing Address 8551 NEW ENGLAND CT

City	State	Zip Code
CINCINNATI	OH	45236

FEC ID number of contributing federal political committee.

C

Name of Employer  
CAI INSURANCE

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126679**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LEONARD SCHMICK**

Mailing Address 5669 ANGLE ROAD

City	State	Zip Code
OSHKOSH	WI	54904

FEC ID number of contributing federal political committee.

C

Name of Employer  
SUBWAY

Occupation  
0

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126681**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1483 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID SCHMIDT**

Mailing Address PO BOX 1158

City	State	Zip Code
PAUMA VALLEY	CA	92061

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126683**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEAN SCHMIDT**

Mailing Address W5175 STATE ROAD 21

City	State	Zip Code
NECEDAH	WI	54646

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WOODCRAFT HOMES**

Occupation  
**OFFICE MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126684**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEAN SCHMIDT**

Mailing Address W5175 STATE ROAD 21

City	State	Zip Code
NECEDAH	WI	54646

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WOODCRAFT HOMES**

Occupation  
**OFFICE MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

**Transaction ID : SA17A.126685**

Date of Receipt

**08 / 13 / 2015**

Amount of Each Receipt this Period

15.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1165.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1484 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN SCHMIDT**

Mailing Address 2085 SANDALWOOD CT

City	State	Zip Code
GREEN BAY	WI	54304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126687**

Date of Receipt

**08 / 05 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KARL SCHMIDT**

Mailing Address 2085 SANDALWOOD CT

City	State	Zip Code
GREEN BAY	WI	54304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BELMARK, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126689**

Date of Receipt

**08 / 05 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KARL SCHMIDT**

Mailing Address 2085 SANDALWOOD CT

City	State	Zip Code
GREEN BAY	WI	54304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BELMARK, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126690**

Date of Receipt

**08 / 05 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1485 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY A SCHMIDT**

Mailing Address 3232 S BLUE SPRUCE LN

City	State	Zip Code
APPLETON	WI	54915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126692**

Date of Receipt

**08 / 03 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY A SCHMIDT**

Mailing Address 3232 S BLUE SPRUCE LN

City	State	Zip Code
APPLETON	WI	54915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2715.00

**Transaction ID : SA17A.126693**

Date of Receipt

**08 / 17 / 2015**

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

15.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD L SCHMIDT**

Mailing Address 4675 THREE MEADOWS D

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CG SCHMIDT

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126695**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

265.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1486 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD L SCHMIDT**

Mailing Address 4675 THREE MEADOWS D

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
CG SCHMIDT

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

**Transaction ID : SA17A.126696**

Date of Receipt

MM / DD / YYYY  
08 / 10 / 2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD L SCHMIDT**

Mailing Address 4675 THREE MEADOWS D

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
CG SCHMIDT

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.126697**

Date of Receipt

MM / DD / YYYY  
09 / 04 / 2015

Amount of Each Receipt this Period

15.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT A SCHMIDT**

Mailing Address 350 N FILLMORE ST

City	State	Zip Code
LANCASTER	WI	53813

FEC ID number of contributing federal political committee.

C

Name of Employer  
GASSER TRUE VALUE

Occupation  
RETAIL OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126699**

Date of Receipt

MM / DD / YYYY  
09 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

525.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1487 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SETH R SCHMIDT**

Mailing Address **N6588 BIRCH RD**

City <b>ELKHORN</b>	State <b>WI</b>	Zip Code <b>53121</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NAPA**

Occupation  
**PARTS SPECIALIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**275.00**

**Transaction ID : SA17A.126700**

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SETH R SCHMIDT**

Mailing Address **N6588 BIRCH RD**

City <b>ELKHORN</b>	State <b>WI</b>	Zip Code <b>53121</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NAPA**

Occupation  
**PARTS SPECIALIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**295.00**

**Transaction ID : SA17A.126701**

Date of Receipt

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Receipt this Period

**20.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS A SCHMIDT**

Mailing Address **W2258 BROOKHAVEN DRI**

City <b>APPLETON</b>	State <b>WI</b>	Zip Code <b>54915</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**US OIL CO.**

Occupation  
**CHAIRMAN OF BOARD**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126703**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5670.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1488 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS A SCHMIDT**

Mailing Address **W2258 BROOKHAVEN DRI**

City	State	Zip Code
APPLETON	WI	54915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**US OIL CO.**

Occupation  
**CHAIRMAN OF BOARD**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126704**

Date of Receipt

**08 / 03 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN SCHMITZ**

Mailing Address **6648 WALTERS DRIVE**

City	State	Zip Code
WEST BEND	WI	53090

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SCHMITZ READY MIX**

Occupation  
**MANUFACTURING OPERATION MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.126706**

Date of Receipt

**09 / 23 / 2015**

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK C SCHMITZ**

Mailing Address **140 WHITLOCK STREET**

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MOOSEJAW RESTAURANT**

Occupation  
**GENERAL MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126708**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRY L SCHMITZ**

Mailing Address **4253 W RIVERS EDGE C**

City <b>BROWN DEER</b>	State <b>WI</b>	Zip Code <b>53209</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126710**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARL SCHMUCK**

Mailing Address **4417 OAKWOOD HILLS PARK**

City <b>EAU CLAIRE</b>	State <b>WI</b>	Zip Code <b>54701</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**275.00**

**Transaction ID : SA17A.126711**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

**125.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CARL SCHMUCK**

Mailing Address **4417 OAKWOOD HILLS PARK**

City <b>EAU CLAIRE</b>	State <b>WI</b>	Zip Code <b>54701</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126712**

Date of Receipt

**08 / 19 / 2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLYN SCHNEEBECK**

Mailing Address 741 N MANASOTA KEY R

City	State	Zip Code
ENGLEWOOD	FL	34223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126714**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT W SCHNEEBECK**

Mailing Address 741 N MANASOTA KEY ROAD

City	State	Zip Code
ENGLEWOOD	FL	34223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STRATEGIC PROGRAM MANAGERS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126716**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRENDA SCHNEIDER**

Mailing Address PO BOX 139

City	State	Zip Code
EGG HARBOR	WI	54209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126718**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL ANN SCHNEIDER**

Mailing Address 1074 ULAO PKWY.

City	State	Zip Code
GRAFTON	WI	53024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SEEK CAREERS/STAFFING, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126720**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE SCHNEIDER**

Mailing Address 28697 FAIRVIEW LN

City	State	Zip Code
BELLEVUE	IA	52031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BELLEVUE SAND & GRAVEL CO**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126722**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL C SCHNEIDER**

Mailing Address PO BOX 139

City	State	Zip Code
EGG HARBOR	WI	54209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126724**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL C SCHNEIDER**

Mailing Address PO BOX 139

City

EGG HARBOR

State

WI

Zip Code

54209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126725**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARILYN B SCHNUCK**

Mailing Address 131 LINDEN AVE

City

SAINT LOUIS

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126727**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**W. SCHOCK**

Mailing Address 219 WOODBOURNE DRIVE

City

ST. LOUIS

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126729**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALICE L SCHOEDEL**

Mailing Address **W583 EAGLE ROAD**

City <b>NESHKORO</b>	State <b>WI</b>	Zip Code <b>54960</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126731**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL SCHOENECK**

Mailing Address **13635 PARK CIR S**

City <b>ELM GROVE</b>	State <b>WI</b>	Zip Code <b>53122</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SCHOENECK CONTAINERS**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126733**

Date of Receipt

**06 / 25 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN SCHOFIELD**

Mailing Address **1801 COLONIAL ARMS CIRCLE #4A**

City <b>VIRGINIA BEACH</b>	State <b>VA</b>	Zip Code <b>23454</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**700.00**

**Transaction ID : SA17A.126734**

Date of Receipt

**09 / 18 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1494 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRANDON SCHOLZ**

Mailing Address 4526 ELLINGTON WAY

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

C

Name of Employer  
**THE CAPITAL GROUP**

Occupation  
**PARTNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETER SCHOON**

Mailing Address 769 BOULDER DRIVE

City	State	Zip Code
ORONO	MN	55356

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.126737**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER SCHOON**

Mailing Address 769 BOULDER DRIVE

City	State	Zip Code
ORONO	MN	55356

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

**Transaction ID : SA17A.126738**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

335.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1495 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WARREN SCHOONOVER**

Mailing Address 7276 E CRIMSON SKY T

City	State	Zip Code
SCOTTSDALE	AZ	85266

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126740**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**E. SCHRANG**

Mailing Address 414 E WISCONSIN AVE

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126742**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM SCHREIBEL**

Mailing Address N80W28196 ADAMS ROAD

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

C

Name of Employer  
SHECHEN FAMILY COMPANIES

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126744**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN SCHREIBER**

Mailing Address 66 ROBERTSON ROAD

City	State	Zip Code
LYNBROOK	NY	11563

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**JOHN C SCHREIBER IRRIGATION INC**

Occupation  
**IRRIGATION INSTALLER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126746**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**C P SCHRIBER SCHRIBER**

Mailing Address PO BOX 70

City	State	Zip Code
MC NEIL	TX	78651

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FILM FLEET, LLC**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126748**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LARRY SCHROCK**

Mailing Address 30046 MUIRLAND DRIVE

City	State	Zip Code
FARMINGTON HILLS	MI	48334

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126750**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ADRIAN SCHROEDER**

Mailing Address 354 RICHMOND LN

City	State	Zip Code
LAKEWOOD	IL	60014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NO COMPANY**

Occupation  
**NOT WORKING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126752**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRIAN SCHROEDER**

Mailing Address 1947 KETTLE CREEK DR

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JACK SCHROEDER AND ASSOCIATES, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.126754**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

750.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAY SCHROEDER**

Mailing Address 1295 N LAKE ST

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126756**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1498 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JENIFER J SCHROEDER**

Mailing Address 2212 HILLCREST DR

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126758**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN T SCHROEDER**

Mailing Address W9563 COUNTY ROAD D

City	State	Zip Code
ANTIGO	WI	54409

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.126760**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS SCHRYVER**

Mailing Address 4627 COUNTRY CLUB BLVD

City	State	Zip Code
SIOUX CITY	IA	51104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
HEALTHCARE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126762**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1499 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KIM SCHUBERT**

Mailing Address 5445 N HIGHWAY 83

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126764**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALEX SCHUETTENB**

Mailing Address 2544 SE VICKSBURG ST

City	State	Zip Code
BARTLESVILLE	OK	74006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126766**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALEX SCHUETTENBERG**

Mailing Address 2544 SE VICKSBURG ST

City	State	Zip Code
BARTLESVILLE	OK	74006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126768**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1500 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET A SCHUH**

Mailing Address **N9351 ISAAR ROAD**

City **SEYMOUR** State **WI** Zip Code **54165**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSTRUCTION**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126770**

Date of Receipt

**09 / 11 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES SCHUHMACHER**

Mailing Address **PO BOX 57868**

City **WEBSTER** State **TX** Zip Code **77598**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126772**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JODI SCHULTEIS**

Mailing Address **3276 CROSSWIND COURT**

City **COLGATE** State **WI** Zip Code **53017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HEALTH DIAGNOSTIC LABORATORY**

Occupation  
**REGIONAL SALES MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126774**

Date of Receipt

**07 / 07 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1501 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL SCHULTZ**

Mailing Address 13785 BALD CYPRESS C

City	State	Zip Code
FORT MYERS	FL	33907

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

283.00

**Transaction ID : SA17A.126775**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

83.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MIKE SCHULTZ**

Mailing Address 5983 HARBOUR SOUTH DRIVE

City	State	Zip Code
WINNECONNE	WI	54986

FEC ID number of contributing federal political committee.

C

Name of Employer  
WHITELIGHT GROUP

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1010.00

**Transaction ID : SA17A.126777**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

1010.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROGER A SCHULTZ**

Mailing Address 9683 BLUEBILL ROAD

City	State	Zip Code
WOODBURY	MN	55125

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126779**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3593.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1502 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY SCHULZE**

Mailing Address **3437 W MERCER WAY**

City	State	Zip Code
MERCER ISLAND	WA	98040

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.126781**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

450.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY SCHUMACHER**

Mailing Address **2200 LAKE WOODS WAY**

City	State	Zip Code
STOUGHTON	WI	53589

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126783**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES E SCHUMACHER**

Mailing Address **3015 FENCELINE ROAD**

City	State	Zip Code
RACINE	WI	53406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**APOSTOLIC FAITH CHURCH**

Occupation  
**PASTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126785**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1503 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS M SCHUMACHER**

Mailing Address 2001 LOST DAUPHIN ROAD

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126787**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHILLIP SCHUSTER**

Mailing Address PO BOX 685

City	State	Zip Code
YACHATS	OR	97498

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126789**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANET SCHUTTE**

Mailing Address 13737 W ROBERTSON DR

City	State	Zip Code
SUN CITY WEST	AZ	85375

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126791**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1504 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRY SCHUTZ**

Mailing Address 2303 HICKORY HILLS ROAD

City	State	Zip Code
ROCK FALLS	IL	61071

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126793**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**T. W SCHWALENBE**

Mailing Address N2572 KITZINGER LN

City	State	Zip Code
FORT ATKINSON	WI	53538

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126795**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BART SCHWARTZ**

Mailing Address 14 SALEM HILL ROAD  
PO BOX431

City	State	Zip Code
SOUTH SALEM	NY	10590

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SOLUTIONOIJUNT INTERNATIONAL, INC.**

Occupation  
**ATTORNEY/BUSINESS EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126797**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1505 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENT SCHWARTZ**

Mailing Address 1252 E 1ST STREET

City	State	Zip Code
TUSTIN	CA	92780

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

**Transaction ID : SA17A.126799**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

330.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL D SCHWARTZ**

Mailing Address 401 EAGLE BLUFF DR

City	State	Zip Code
HUDSON	WI	54016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126801**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD SCHWARTZ**

Mailing Address 3110 KETTERING BLVD

City	State	Zip Code
MORaine	OH	45439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126803**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3530.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1506 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THOMAS SCHWEICKERT**

Mailing Address 35 CORA COURT

City

WALNUT CREEK

State

CA

Zip Code

94597

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ACCOUNTANT

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126805**

Date of Receipt

MM / DD / YYYY  
06 / 25 / 2015

25

2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES SCHWEIZER**

Mailing Address 2840 S CAMANO DR

City

CAMANO ISLAND

State

WA

Zip Code

98282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126807**

Date of Receipt

MM / DD / YYYY  
07 / 30 / 2015

30

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DON SCIFRES**

Mailing Address 26700 PALO HILLS DR

City

LOS ALTOS

State

CA

Zip Code

94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.126809**

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

15

2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CLAY D SCOFIELD**

Mailing Address 2122 NESMITH ROAD

City	State	Zip Code
GUNTERSVILLE	AL	35976

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STATE OF ALABAMA

Occupation  
SENATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126811**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANET SCOTT**

Mailing Address 695 RIVER OAKS DR

City	State	Zip Code
HAYESVILLE	NC	28904

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126813**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN SCOTT**

Mailing Address PO BOX 66

City	State	Zip Code
LAKE DELTON	WI	53940

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126815**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1508 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JULIE SCOTT**

Mailing Address 1126 NASSAU WAY

City	State	Zip Code
FORT COLLINS	CO	80525

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126817**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROY SCOTT**

Mailing Address 11 LAUREL LN

City	State	Zip Code
WILBRAHAM	MA	01095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126819**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RALPH SEABAUGH**

Mailing Address 17871 HWY. 157

City	State	Zip Code
PLAIN DEALING	LA	71064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
UPRR COND. RET.

Occupation  
UNION PACIFIC RR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126820**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1509 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**D. GIDEON SEARLE**

Mailing Address **316 NEAPOLITAN WAY**

City	State	Zip Code
NAPLES	FL	34103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126822**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES SEARS**

Mailing Address **3609 VIA LA SELVA**

City	State	Zip Code
PALOS VERDES ESTATES	CA	90274

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126824**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS P SEATON**

Mailing Address **7300 METRO BLVD STE 500**

City	State	Zip Code
MINNEAPOLIS	MN	55439

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SEATON, BECK, & PETERS PA**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126826**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1510 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT SEATON**

Mailing Address **14349 HAMILTON ST**

City	State	Zip Code
OMAHA	NE	68154

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SCOTT ENTERPRISES**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126828**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANDREW SEBOR**

Mailing Address **20 DANIEL CT**

City	State	Zip Code
WESTPORT	CT	06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126830**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SARA SEGAL**

Mailing Address **9708 TURNBUCKLE DR**

City	State	Zip Code
BURKE	VA	22015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FAIRFAX COUNTY PUBLIC SCHOOLS**

Occupation  
**ASSISTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.126833**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1025.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1511 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOANNE M SEGEBARTH**

Mailing Address 3998 WINDFIELD LN

City	State	Zip Code
ERLANGER	KY	41018

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.126834**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHI SEIFERT**

Mailing Address 3091 FOX RUN

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KATAPULT, LLC

Occupation  
EXECUTIVE VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126836**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT H. SELDEN**

Mailing Address 175 WEST OLIVE STREET

City	State	Zip Code
EMHURST	IL	60126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126838**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1512 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL SELKIRK**

Mailing Address 1467 S CENTER POINT DRI

City	State	Zip Code
WASILLA	AK	99654

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.126839**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		29		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUGLAS C SELLERS**

Mailing Address 912 WESTVIEW AVENUE

City	State	Zip Code
NASHVILLE	TN	37205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126841**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS C SELLERS**

Mailing Address 912 WESTVIEW AVENUE

City	State	Zip Code
NASHVILLE	TN	37205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126842**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-250.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1513 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LESLIE SELLERS**

Mailing Address 912 WESTVIEW AVENUE

City	State	Zip Code
NASHVILLE	TN	37205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126844**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REATTRIBUTED

Amount of Each Receipt this Period

250.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD J SEMERSKY**

Mailing Address 1361 E 55TH STREET

City	State	Zip Code
CLEVELAND	OH	44103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
VIP RESTORATION

Occupation  
PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126846**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFFREY SEMON**

Mailing Address 4 ADAMS CIR

City	State	Zip Code
WOBURN	MA	01801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WINTER WYMON

Occupation  
PROJECT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126848**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1514 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL J SENKEN**

Mailing Address 145 INWOOD TER

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MIMEDX GROUP**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126850**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SERBECK**

Mailing Address 6900 PINECONE CIRCLE

City	State	Zip Code
ANCHORAGE	AK	99516-3724

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HILCORP ENERGY**

Occupation  
**GEOLOGIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126851**

Date of Receipt

**08 / 31 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PATRICIA SERIO**

Mailing Address 20134E DAMERAL DR

City	State	Zip Code
COVINA	CA	91725

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1170.00

**Transaction ID : SA17A.126852**

Date of Receipt

**08 / 13 / 2015**

**EARMARKED THROUGH CLUB FOR GROWTH PAC**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1515 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY SEWELL**

Mailing Address 3400 JUNCTION CITY HIGH

City	State	Zip Code
EL DORADO	AR	71730

FEC ID number of contributing federal political committee.

C

Name of Employer  
SEWELL DRILLING

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126854**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY SEWELL**

Mailing Address 3 PURSUIT

City	State	Zip Code
ALISO VIEJO	CA	92656

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.126855**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALEXANDER SEYFARTH**

Mailing Address 5576 W RIVER OAKS ROAD

City	State	Zip Code
JANESVILLE	WI	53545

FEC ID number of contributing federal political committee.

C

Name of Employer  
BRUEER

Occupation  
PRODUCT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.126857**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

575.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1516 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA D SHABAZ**

Mailing Address 1501 BURNING WOOD WAY

City	State	Zip Code
MADISON	WI	53704

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126859**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT A SHADE, JR.**

Mailing Address 3224 VISTA ROAD

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126861**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TO SHAFFER**

Mailing Address 14840 PECOS ST

City	State	Zip Code
BROOMFIELD	CO	80023

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126863**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1517 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**W S (BILL) SHAFFER**

Mailing Address 34515 MODOC POINT ROAD

City	State	Zip Code
CHILPQUIN	OR	97624

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126865**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS SHANAHAN**

Mailing Address 100 MANZANITA WAY

City	State	Zip Code
WOODSIDE	CA	94062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126867**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL SHANNON**

Mailing Address N57W30816 LAKEWOOD DRIVE

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
FIS

Occupation  
GENERAL MGR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126869**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1518 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN SHANNON**

Mailing Address 3657 BIRCHWOOD ROAD

City	State	Zip Code
SAUKVILLE	WI	53080

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128730**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS SHANNON**

Mailing Address 3657 BIRCHWOOD ROAD

City	State	Zip Code
SAUKVILLE	WI	53080

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

F

INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126871**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS SHANNON**

Mailing Address 3657 BIRCHWOOD ROAD

City	State	Zip Code
SAUKVILLE	WI	53080

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

SELF-EMPLOYED

INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128728**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1519 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL SHAPIRO**

Mailing Address 1365 WOODLAND LANE

City	State	Zip Code
RIVERWOODS	IL	60015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126873**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL SHAPIRO**

Mailing Address 1365 WOODLAND LANE

City	State	Zip Code
RIVERWOODS	IL	60015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126873.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ANNE SHAPIRO**

Mailing Address 1365 WOODLAND LANE

City	State	Zip Code
RIVERWOODS	IL	60015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126873.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1520 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NATE SHAPIRO**

Mailing Address **1661 RYDERS LANE**

City <b>HIGHLAND PARK</b>	State <b>IL</b>	Zip Code <b>60035</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SF INVESTMENTS, INC**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.126877**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NATE SHAPIRO**

Mailing Address **1661 RYDERS LANE**

City <b>HIGHLAND PARK</b>	State <b>IL</b>	Zip Code <b>60035</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SF INVESTMENTS, INC**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126877.0**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RANDY SHAPIRO**

Mailing Address **1661 RYDERS LANE**

City <b>HIGHLAND PARK</b>	State <b>IL</b>	Zip Code <b>60035</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126877.1**

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1521 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN A SHAPIRO**

Mailing Address **845 KIMBALLWOOD LN**

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SF INVESTMENTS**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126879**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVEN A SHAPIRO**

Mailing Address **845 KIMBALLWOOD LN**

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SF INVESTMENTS**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126879.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LESLIE SHAPIRO**

Mailing Address **845 KIMBALLWOOD LANE**

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126879.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1522 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MOE SHARIFKHANI**

Mailing Address 833 PARK PLACE DRIVE

City	State	Zip Code
MENDOTA HEIGHTS	MN	55118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DOWNTOWNER WOODFIRE

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.126882**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MOE SHARIFKHANI**

Mailing Address 833 PARK PLACE DRIVE

City	State	Zip Code
MENDOTA HEIGHTS	MN	55118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DOWNTOWNER WOODFIRE

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126882.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MOE SHARIFKHANI**

Mailing Address 833 PARK PLACE DRIVE

City	State	Zip Code
MENDOTA HEIGHTS	MN	55118

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DOWNTOWNER WOODFIRE

Occupation  
BUSINESS OWNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.126882.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1523 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEREK SHASHEK**

Mailing Address 9106 FRUIT ROAD

City State Zip Code  
EDWARDSVILLE IL 62025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CASSIE TRANSPORT

Occupation  
AUTO LIG.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

660.00

**Transaction ID : SA17A.126884**

Date of Receipt

M M / D D / Y Y Y Y  
07 29 2015

Amount of Each Receipt this Period

660.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN SHAW**

Mailing Address 5 HAMBLETONIAN DR

City State Zip Code  
COLTS NECK NJ 07722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.126885**

Date of Receipt

M M / D D / Y Y Y Y  
07 14 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN SHAW**

Mailing Address 5 HAMBLETONIAN DR

City State Zip Code  
COLTS NECK NJ 07722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.126886**

Date of Receipt

M M / D D / Y Y Y Y  
08 06 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1160.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1524 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN SHAW**

Mailing Address 7825 LA BARRINGTON BLVD

City	State	Zip Code
POWELL	TN	37849

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126888**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT SHAW**

Mailing Address 2084 GILLEN LN

City	State	Zip Code
FALLS CHURCH	VA	22043

FEC ID number of contributing federal political committee.

C

Name of Employer  
JPMORGAN

Occupation  
RISK DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126890**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT SHAW**

Mailing Address 2084 GILLEN LN

City	State	Zip Code
FALLS CHURCH	VA	22043

FEC ID number of contributing federal political committee.

C

Name of Employer  
JPMORGAN

Occupation  
RISK DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126891**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1525 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANN H SHEA**

Mailing Address **711 N WEBSTER AVE**

City <b>DE PERE</b>	State <b>WI</b>	Zip Code <b>54115</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.126893**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET SHEA**

Mailing Address **1118 BARRINGTON PL**

City <b>MISHAWAKA</b>	State <b>IN</b>	Zip Code <b>46545</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.126895**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET SHEA**

Mailing Address **1118 BARRINGTON PL**

City <b>MISHAWAKA</b>	State <b>IN</b>	Zip Code <b>46545</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**600.00**

**Transaction ID : SA17A.126896**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1600.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1526 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD SHEA**

Mailing Address 275 CENTRAL PARK WEST 14B

City	State	Zip Code
NEW YORK	NY	10024

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126898**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRENDAN J SHEAHAN**

Mailing Address 635 W GLENVIEW AVENUE

City	State	Zip Code
OCONOMOWOC	WI	53006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DARWIN REALTY

Occupation  
BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.126900**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK D SHEEHAN**

Mailing Address 2985 NASSAU DR

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126902**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1527 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN SHEEHAN**

Mailing Address 9075 N RANGE LINE ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BEECHWOOD SALES AND SERVICE**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126904**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA SHELDON**

Mailing Address 211 ANDERSON DR

City	State	Zip Code
ANTIGO	WI	54409

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126906**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA SHELDON**

Mailing Address 211 ANDERSON DR

City	State	Zip Code
ANTIGO	WI	54409

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.126907**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1528 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THEORA SHELLEY**

Mailing Address 10624 E TERRA DR

City	State	Zip Code
SCOTTSDALE	AZ	85258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126909**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PRESTON SHELTON**

Mailing Address P.O. BOX 13136

City	State	Zip Code
FT LAUDERDALE	FL	33316

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PORT EVERGLADES PILOT ASSOC

Occupation  
HARBOR PILOT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.126910**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

40.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HEATHER SHELILT**

Mailing Address 184 E 64TH STREET, FL 3

City	State	Zip Code
NEW YORK	NY	10065

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126912**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5440.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1529 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TOM SHEPHERD**

Mailing Address **918 BREAKWATER DRIVE**

City	State	Zip Code
FORT COLLINS	CO	80525

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126914**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SHEPLEY**

Mailing Address **10426 WHITE BRIDGE LN**

City	State	Zip Code
SAINT LOUIS	MO	63141

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.126916**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

**220.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD C SHERMAN**

Mailing Address **9475 N SNAKE RIVER DR**

City	State	Zip Code
JACKSON	WY	83001

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.126918**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3170.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1530 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELLEN SHERRED**

Mailing Address 86 W NURSERY RD

City	State	Zip Code
SANTA ROSA BEACH	FL	32459

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126920**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELLEN SHERRED**

Mailing Address 86 W NURSERY RD

City	State	Zip Code
SANTA ROSA BEACH	FL	32459

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.126921**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER SHERRY**

Mailing Address 1260 CANDLEWOOD COURT

City	State	Zip Code
DOWNERS GROVE	IL	60515

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SAF-T-LOK INTERNATIONAL

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126923**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1531 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES SHIBLEY**

Mailing Address 235 OLSON WAY UNIT 619

City	State	Zip Code
SUNNYVALE	CA	94086

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.126924**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANITA M SHIPPEN**

Mailing Address 3005 PACES LAKE CT SE

City	State	Zip Code
ATLANTA	GA	30339

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.126926**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM D SHIRKEY**

Mailing Address 20756 COBBLESTONE LANE

City	State	Zip Code
DUBUQUE	IA	52001

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126928**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1532 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL J SHOCKLEY**

Mailing Address 11107 101ST PL NE

City	State	Zip Code
KIRKLAND	WA	98033

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126930**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK SHOEN**

Mailing Address 715 S COUNTRY CLUB DRIVE, SUITE D

City	State	Zip Code
MESA	AZ	85210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126932**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK SHOEN**

Mailing Address 715 S COUNTRY CLUB DRIVE, SUITE D

City	State	Zip Code
MESA	AZ	85210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128876**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1533 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK SHOEN**

Mailing Address 715 S COUNTRY CLUB DRIVE, SUITE D

City	State	Zip Code
MESA	AZ	85210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128877**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK SHOEN**

Mailing Address 715 S COUNTRY CLUB DRIVE, SUITE D

City	State	Zip Code
MESA	AZ	85210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7400.00

**Transaction ID : SA17A.126933**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONNA SHOFF**

Mailing Address 151 OAK ROAD

City	State	Zip Code
CONESTOGA	PA	17516

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126935**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1534 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DEAN SHORT**

Mailing Address 320 PREMIER CT S

City	State	Zip Code
FRANKLIN	TN	37067

FEC ID number of contributing federal political committee.

C

Name of Employer  
SURGICOR

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126937**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAMELA SHOVERS**

Mailing Address 1071 E. THORNE LANE

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126939**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAMELA SHOVERS**

Mailing Address 1071 E. THORNE LANE

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126940**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1535 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAMELA SHOVERS**

Mailing Address 1071 E. THORNE LANE

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126940.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DR. JEFFREY SHOVERS**

Mailing Address 1071 E. THORNE LANE

City	State	Zip Code
FOX POINT	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AURORA HEALTH CARE

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126940.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHERRON SHULL**

Mailing Address 20715 N CALHOUN LN

City	State	Zip Code
NINE MILE FAL	WA	99026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126942**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1536 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BETH SHULLY**

Mailing Address 2309 W LAGOON CT

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SHULLY'S CUISINE & EVENTS**

Occupation  
**EVENT PLANNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126944**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALLEN SIDOR**

Mailing Address 38 SAN SIMEON

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CDS MOVING EQUIPMENT, INC.**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126946**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALLEN SIDOR**

Mailing Address 38 SAN SIMEON

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CDS MOVING EQUIPMENT, INC.**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.126947**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1537 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET SIEBERT**

Mailing Address 929 LONGWOOD DRIVE

City LAKE FOREST	State IL	Zip Code 60045
---------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126949**

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES SIEKMAN**

Mailing Address 100 W LAWRENCE ST

City APPLETON	State WI	Zip Code 54911
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SAXON CORP.

Occupation  
ANTIQUA DEALER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126951**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NEAL SIEWERT**

Mailing Address 910 MAIN ST. APT. 210

City RED WING	State MN	Zip Code 55066
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126953**

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1538 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARILYN SILINEY**

Mailing Address 11 MARY ELLEN WAY

City	State	Zip Code
BLOOMINGTON	IL	61701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126955**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SILLIMAN**

Mailing Address 16 JARDINE LN

City	State	Zip Code
LINCOLN PARK	NJ	07035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WGHT RADIO

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126957**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN SILSETH**

Mailing Address 15815 CHOCTAW TRAIL

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126959**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1539 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAYLEN M SILVERBERG**

Mailing Address 5501 CUESTA VERDE

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126961**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFFREY SILVERMAN**

Mailing Address 1445 16TH STREET #1102

City	State	Zip Code
MIAMI BEACH	FL	33139

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126963**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOE SILVERMAN**

Mailing Address 3430 VALEMONT ST

City	State	Zip Code
SAN DIEGO	CA	92106-2433

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126965**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			16			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1540 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****MARY KAY SILVERMAN**

Mailing Address 132 E. DELAWARE PL APT. 6602

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126967**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****JOHN SIMMONDS**

Mailing Address 136 BROMLEY PARK LANE

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126969**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			09			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****ANNETTE SIMMONS**

Mailing Address 5915 DELOACHE

City	State	Zip Code
DALLAS	TX	75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126971**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			02			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1541 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN SIMMONS**

Mailing Address **RR 2 BOX 396**

City State Zip Code  
**WESTVILLE OK 74965**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SOUTHLAND REGIONAL S**

Occupation  
**TERRITORIAL FIELD RE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126973**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MIKE SIMON**

Mailing Address **531 W LAUREL AVENUE**

City State Zip Code  
**EUNICE LA 70535**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.126975**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MIKE SIMON**

Mailing Address **531 W LAUREL AVENUE**

City State Zip Code  
**EUNICE LA 70535**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.126976**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1542 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RAYMOND SIMON**

Mailing Address 3309 WORTHINGTON DR

City	State	Zip Code
MODESTO	CA	95350

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126978**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICE SIMONSEN**

Mailing Address 17891 OLD WINEMASTER

City	State	Zip Code
POWAY	CA	92064

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CORVA LLC

Occupation  
HEALTHCARE EXEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126980**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA SIMONSON**

Mailing Address M535 CAYMAN STREET

City	State	Zip Code
MARSHFIELD	WI	54449

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CENTURY 21 GOLD KEY REALTY INC

Occupation  
REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.126982**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

275.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5675.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1543 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERALD W SIMONSON**

Mailing Address 5813 JEFF PLACE

City	State	Zip Code
EDINA	MN	55436

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**OMNETICS CONNECTOR CORPORATION**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126983**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROY F SIMPERMAN**

Mailing Address 5609 80TH AVENUE SE

City	State	Zip Code
MERCER ISLAND	WA	98040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.126985**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LESTER D SIMS**

Mailing Address 214 EMERY STREET

City	State	Zip Code
MULVANE	KS	67110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NA**

Occupation  
**NA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.126987**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1544 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. SINGELTARY**

Mailing Address 162 SEAY RD

City	State	Zip Code
FAYETTEVILLE	GA	30215

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126989**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALVIN SINGER**

Mailing Address 475 LAUREL AVENUE APT F

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126991**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALVIN SINGER**

Mailing Address 475 LAUREL AVENUE APT F

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126992**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1545 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALVIN SINGER**

Mailing Address 475 LAUREL AVENUE APT F

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126992.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALVIN SINGER**

Mailing Address 475 LAUREL AVENUE APT F

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.126992.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BALVINDER SINGH**

Mailing Address 2430 BENNETT

City	State	Zip Code
TUSTIN	CA	92782

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.126994**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1546 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CYNTHIA SINOR**

Mailing Address 20 OAK LEDGE LN

City	State	Zip Code
WILTON	CT	06897

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126996**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CYRUS SINOR**

Mailing Address 1856 CENTRAL AVENUE

City	State	Zip Code
SULLIVANS ISLAND	SC	29482

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IPW CONSTRUCTION

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.126998**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**REX A SINQUEFIELD**

Mailing Address 244 BENT WALNUT LN

City	State	Zip Code
WESTPHALIA	MO	65085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.127005**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

11300.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1547 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REX A SINQUEFIELD**

Mailing Address **244 BENT WALNUT LN**

City <b>WESTPHALIA</b>	State <b>MO</b>	Zip Code <b>65085</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127005.0**

Date of Receipt

**07 / 29 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-5400.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEANNE SINQUEFIELD**

Mailing Address **244 BENT WALNUT LN**

City <b>WESTPHALIA</b>	State <b>MO</b>	Zip Code <b>65085</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127005.1**

Date of Receipt

**07 / 29 / 2015**

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEANNE SINQUEFIELD**

Mailing Address **244 BENT WALNUT LN**

City <b>WESTPHALIA</b>	State <b>MO</b>	Zip Code <b>65085</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127005.2**

Date of Receipt

**07 / 29 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**0.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1548 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEANNE SINQUEFIELD**

Mailing Address **244 BENT WALNUT LN**

City

**WESTPHALIA**

State

**MO**

Zip Code

**65085**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127005.3**

Date of Receipt

**07 / 29 / 2015**

**REDESIGNATED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**REX A SINQUEFIELD**

Mailing Address **244 BENT WALNUT LN**

City

**WESTPHALIA**

State

**MO**

Zip Code

**65085**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127005.4**

Date of Receipt

**07 / 29 / 2015**

**SEE REDESIGNATION**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REX A SINQUEFIELD**

Mailing Address **244 BENT WALNUT LN**

City

**WESTPHALIA**

State

**MO**

Zip Code

**65085**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127005.5**

Date of Receipt

**07 / 29 / 2015**

**REDESIGNATED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**0.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1549 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD SIPPEL**

Mailing Address **7 HOLLYTREE LANE**

City	State	Zip Code
GLEN COVE	NY	11542

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.127010**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD SIRE**

Mailing Address **2448 YAJOME ST**

City	State	Zip Code
NAPA	CA	94558

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**R.L. SIRE AND COMPANY, CPAS**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.127011**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD SIRE**

Mailing Address **2448 YAJOME ST**

City	State	Zip Code
NAPA	CA	94558

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**R.L. SIRE AND COMPANY, CPAS**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.127012**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1550 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN SITES**

Mailing Address **209 LONG NECK POINT**

City State Zip Code  
**DARIEN CT 06820**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WEXFORD CAPITAL LP**

Occupation  
**INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127014**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE SKAKEL**

Mailing Address **81 HOLLY HILL LANE**

City State Zip Code  
**GREENWICH CT 06830**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127016**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS F SKEHAN**

Mailing Address **933 STREAM VIEW LANE**

City State Zip Code  
**YORK PA 17403**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127018**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**3000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1551 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD SKELTON**

Mailing Address 1839 ALTA VISTA AVE

City	State	Zip Code
WAUWATOSA	WI	53213

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127020**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES SKINNER**

Mailing Address 316 HARBOR POINT CIRCLE

City	State	Zip Code
DULUTH	MN	55802

FEC ID number of contributing federal political committee.

C

Name of Employer  
GRANITE PEAK SKI AREA

Occupation  
PRESIDENT/OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127022**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 18 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRAD SKLAR**

Mailing Address 2311 HIGHLAND AVENUE SOUTH, SUITE

City	State	Zip Code
BIRMINGHAM	AL	35205

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127024**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1552 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY SKOGMAN**

Mailing Address 3709 COTTAGE GROVE AVE

City	State	Zip Code
CEDAR RAPIDS	IA	52403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MHD INC

Occupation  
WHOLESALE DISTRIBUTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127026**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAURA SKOGMAN**

Mailing Address 2205 PEBBLE CREEK DRIVE

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.127027**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAURA SKOGMAN**

Mailing Address 2205 PEBBLE CREEK DRIVE

City	State	Zip Code
MARION	IA	52302

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.127028**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

535.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1553 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID SKOMBA**

Mailing Address 10231 RALEIGH TAVERN LANE

City	State	Zip Code
ELLICOTT CITY	MD	21042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127030**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SKOUG**

Mailing Address 7801 WOODBINE LANE

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MARATHON CHEESE CORPORATION

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127032**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY SKOUG**

Mailing Address 7801 WOODBINE LN

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127034**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1554 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**IRVIN SLABACH**

Mailing Address **8731 WINCHESTER ROAD**

City	State	Zip Code
FORT WAYNE	IN	46819

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127036**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**IRVIN SLABACH**

Mailing Address **8731 WINCHESTER ROAD**

City	State	Zip Code
FORT WAYNE	IN	46819

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.127037**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CLIFF SLATER**

Mailing Address **3105 PACIFIC HEIGHTS ROAD**

City	State	Zip Code
HONOLULU	HI	96813

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.127038**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	5

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**550.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1555 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN SLATER**

Mailing Address 4029 W LE MONT BLVD

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DELTA AIR LINES**

Occupation  
**FLIGHT ATTENDANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127039**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDITH SLAWSON**

Mailing Address 10540 E FORESTGATE C

City	State	Zip Code
WICHITA	KS	67206

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127041**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GREGORY SLAYTON**

Mailing Address 8 LEWIN ROAD

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SLAYTON CAPITAL**

Occupation  
**MANAGING DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127043**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1556 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGORY SLAYTON**

Mailing Address 8 LEWIN ROAD

City

HANOVER

State

NH

Zip Code

03755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SLAYTON CAPITAL

Occupation  
MANAGING DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127043.0**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARIA SLAYTON**

Mailing Address 8 LEWIN ROAD

City

HANOVER

State

NH

Zip Code

03755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127043.1**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES SLEDD**

Mailing Address 10314 SAINT ALBAN BL

City

HUNTSVILLE

State

AL

Zip Code

35803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NASA MARSHALL SPACE FLIGHT  
CENTER

Occupation  
AEROSPACE ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127045**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 07 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1557 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES SLEEPER**

Mailing Address 434 LOMA LARGA DRIVE

City	State	Zip Code
SOLANA BEACH	CA	92075

FEC ID number of contributing federal political committee.

C

Name of Employer  
ICC

Occupation  
SALER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.127047**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAURA SLEIN**

Mailing Address 2362 LAKE VIEW CT

City	State	Zip Code
DELAFIELD	WI	53018

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127049**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEN SLOVE**

Mailing Address 212 SWITCHGRASS DRIVE

City	State	Zip Code
ROUND LAKE	IL	60073

FEC ID number of contributing federal political committee.

C

Name of Employer  
LOVIN OVEN CAKERY LLC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127051**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1558 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LLOYD SLUSHER**

Mailing Address 190 JOHNSON RD

City	State	Zip Code
KALAMA	WA	98625

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

303.00

**Transaction ID : SA17A.127053**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

303.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK SMALL**

Mailing Address 505 8TH AVENUE S

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CBP PAYROLL SERVICES

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.127055**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK SMALL**

Mailing Address 505 8TH AVENUE S

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CBP PAYROLL SERVICES

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127056**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

11103.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1559 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK SMALL**

Mailing Address 505 8TH AVENUE S

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CBP PAYROLL SERVICES

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127057**

Date of Receipt

**08 / 10 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK SMALL**

Mailing Address 505 8TH AVENUE S

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CBP PAYROLL SERVICES

Occupation  
ACCOUNTANT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127058**

Date of Receipt

**08 / 10 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MONICA SMALL**

Mailing Address 505 8TH AVENUE SOUTH

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127060**

Date of Receipt

**08 / 10 / 2015**

REATTRIBUTED; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1560 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MONICA SMALL**

Mailing Address 505 8TH AVENUE SOUTH

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127061**

Date of Receipt

**08 / 10 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MONICA SMALL**

Mailing Address 505 8TH AVENUE SOUTH

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127062**

Date of Receipt

**08 / 10 / 2015**

REDESINATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAWRENCE SMILEY**

Mailing Address 2424 EAST 91ST STREET

City	State	Zip Code
INDIANAPOLIS	IN	46240

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PLATFORM PRO, INC.

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.127064**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

240.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

240.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1561 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BAKER SMITH**

Mailing Address **3360 EAST TERRELL BRANCH COURT**

City	State	Zip Code
MARIETTA	GA	30067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BDO CONSULTING LLC**

Occupation  
**MANAGEMENT CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127066**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BARBARA SMITH**

Mailing Address **3222 E HAMPSHIRE AVENUE**

City	State	Zip Code
MILWAUKEE	WI	53211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127068**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BENSON SMITH**

Mailing Address **1095 MAPLE HILL LANE**

City	State	Zip Code
MALVERN	PA	19355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TELEFLEX INC**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127070**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1562 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES SMITH**

Mailing Address **534 TRAILRIDGE DR**

City <b>BONITA</b>	State <b>CA</b>	Zip Code <b>91902</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.127072**

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLAUDIA SMITH**

Mailing Address **1020 VICTORIAN LN**

City <b>PLOVER</b>	State <b>WI</b>	Zip Code <b>54467</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127074**

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CURTIS SMITH**

Mailing Address **6001 ROCK CLIFF LANE, APT A**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22315</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DEPARTMENT OF THE ARMY**

Occupation  
**PROCUREMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127076**

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1563 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CURTIS SMITH**

Mailing Address 6001 ROCK CLIFF LANE, APT A

City	State	Zip Code
ALEXANDRIA	VA	22315

FEC ID number of contributing federal political committee.

C

Name of Employer  
DEPARTMENT OF THE ARMY

Occupation  
PROCUREMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.127077**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			13			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID SMITH**

Mailing Address 10669 HWY 53 W

City	State	Zip Code
TALKING ROCK	GA	30175

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127079**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			15			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD SMITH**

Mailing Address 6109 STONEHAVEN DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127080**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			16			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1564 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD SMITH**

Mailing Address **6109 STONEHAVEN DRIVE**

City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37215</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.127081**

Date of Receipt

M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREG SMITH**

Mailing Address **290 WAR PATH RD**

City <b>SIX MILE</b>	State <b>SC</b>	Zip Code <b>29682</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127083**

Date of Receipt

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GUY SMITH**

Mailing Address **N94W17900 APPLETON A**

City <b>MENOMONEE FAL</b>	State <b>WI</b>	Zip Code <b>53051</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AMERICOR MANAGEMENT SV**

Occupation  
**PRESIDENT/ CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127085**

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1550.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1565 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HAROLD SMITH**

Mailing Address 200 W MADISON STREET, SUITE 3400

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127087**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HATTON C SMITH**

Mailing Address PO BOX 170971

City	State	Zip Code
BIRMINGHAM	AL	35217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ROYAL CUP COFFEE

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127089**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HUNTER SMITH**

Mailing Address 1160 TENNIS RD

City	State	Zip Code
CHARLOTTESVIL	VA	22901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127091**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1566 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES SMITH**

Mailing Address 209 PARK DR

City	State	Zip Code
CHARLES CITY	IA	50616-1619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127093**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JAY SMITH**

Mailing Address 185 CORDOBA WAY

City	State	Zip Code
WINDSOR	CA	95492

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127094**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		08		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KATHRYN SMITH**

Mailing Address 14 BALLANTRAE CT

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127096**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1567 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY SMITH**

Mailing Address 1601 DOVE ST

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MHI REAL COMPANY**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.127098**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

1250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LECIA SMITH**

Mailing Address 3245 LAUREL DR

City	State	Zip Code
BLACKSBURG	VA	24060

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.127100**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK SMITH**

Mailing Address 13010 E WILDERNESS DRIVE

City	State	Zip Code
GORDON	WI	54838

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127102**

Date of Receipt

**08 / 04 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2453.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1568 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MENLO F SMITH**

Mailing Address **14 BALLANTRAE CT**

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SUN MARK CAPITAL**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127104**

Date of Receipt

**08 / 04 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MENLO F SMITH**

Mailing Address **14 BALLANTRAE CT**

City	State	Zip Code
SAINT LOUIS	MO	63131

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SUN MARK CAPITAL**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127105**

Date of Receipt

**08 / 04 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL SMITH**

Mailing Address **W94 N17900 APPLETON AVENUE**

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AMERICOR MANAGEMENT SERVICES LLC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127107**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1569 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL SMITH**

Mailing Address **406 W CENTRAL AVE**

City <b>MOUNT HOLLY</b>	State <b>NC</b>	Zip Code <b>28120</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127109**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL SMITH**

Mailing Address **406 W CENTRAL AVE**

City <b>MOUNT HOLLY</b>	State <b>NC</b>	Zip Code <b>28120</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**550.00**

**Transaction ID : SA17A.127110**

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL SMITH**

Mailing Address **W94 N17900 APPLETON AVENUE**

City <b>MEQUON</b>	State <b>WI</b>	Zip Code <b>53092</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AMERICOR MANAGEMENT SERVICES  
LLC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2800.00**

**Transaction ID : SA17A.127111**

Date of Receipt

M M / D D / Y Y Y Y
08 / 07 / 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

**2300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1570 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL SMITH**

Mailing Address **W94 N17900 APPLETON AVENUE**

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AMERICOR MANAGEMENT SERVICES LLC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128672**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

SEE REDESIGNATION

Amount of Each Receipt this Period

-100.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL SMITH**

Mailing Address **W94 N17900 APPLETON AVENUE**

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**AMERICOR MANAGEMENT SERVICES LLC**

Occupation  
**ATTORNEY**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : SA17A.128673**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

REDESIGNATED

Amount of Each Receipt this Period

100.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MIKE SMITH**

Mailing Address **3835 FRESNO ROAD**

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LINCOLN INDUSTRIAL**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127113**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			16			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1571 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RAY S SMITH**

Mailing Address **5 CONROVYSE PARKWAY**

City	State	Zip Code
ATLANTA	GA	30328

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THRASHER LISS & SMITH**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127115**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD H SMITH**

Mailing Address **128 SWINLEY FRST**

City	State	Zip Code
WILLIAMSBURG	VA	23188

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127117**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RUSSELL C SMITH**

Mailing Address **121 LAKE RD**

City	State	Zip Code
PORTAGE	WI	53901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FERTILITY & NUTRITIONAL COUNCILING**

Occupation  
**VETERINARIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127119**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1572 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RUSSELL C SMITH**

Mailing Address 121 LAKE RD

City	State	Zip Code
PORTAGE	WI	53901

FEC ID number of contributing federal political committee.

C

Name of Employer  
**FERTILITY & NUTRITIONAL COUNCILING**

Occupation  
**VETERINARIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127120**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SANDRA SMITH**

Mailing Address 7169 SW DUNRAVEN LN

City	State	Zip Code
PORT ORCHARD	WA	98367

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127122**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT SMITH**

Mailing Address 5705 RIVIERA DR

City	State	Zip Code
BENTON	AR	72019

FEC ID number of contributing federal political committee.

C

Name of Employer  
**RIVER VALLEY HORTICULTURAL PRODUCTS**

Occupation  
**NURSERYMEN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127124**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1573 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN SMITH**

Mailing Address **6736 MUGGINS CREEK ROAD**

City <b>GLOUCESTER</b>	State <b>VA</b>	Zip Code <b>23061</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127126**

Date of Receipt

M M / D D / Y Y Y Y
<b>09 / 11 / 2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THERESA SMITH**

Mailing Address **2459 ARCTIC FOX WAY**

City <b>RESTON</b>	State <b>VA</b>	Zip Code <b>20191</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SOI**

Occupation  
**SOFTWARE ENGR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127128**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 16 / 2015</b>

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM SMITH**

Mailing Address **30 DEVONSHIRE RD.**

City <b>ATKINSON</b>	State <b>NH</b>	Zip Code <b>03811</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JUNIPER NETWORKS**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127130**

Date of Receipt

M M / D D / Y Y Y Y
<b>06 / 23 / 2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1574 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM SMITH**

Mailing Address 906 SNOWBERRY LN

City	State	Zip Code
SANIBEL	FL	33957

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127131**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILSON P SMITH**

Mailing Address PO BOX 4688

City	State	Zip Code
SPARTANBURG	SC	29305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LUNG & CHEST MEDICAL ASSOC

Occupation  
MEDICAL DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127133**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ZACHARY SMITH**

Mailing Address 1626 N WINCHESTER AVENUE

City	State	Zip Code
CHICAGO	IL	60622

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127135**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1575 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**REBECCA SMUGALA-PL**

Mailing Address PO BOX 16065

City	State	Zip Code
CLAYTON	MO	63105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DES PERES EMPLOYER**

Occupation  
**NURSE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127137**

Date of Receipt

**07 / 29 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARILYN SMYK**

Mailing Address 7 BUNKER HILL AVE

City	State	Zip Code
STRATHAM	NH	03885

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127139**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIM SNEED**

Mailing Address 1121-B BIENVILLE STREET

City	State	Zip Code
TUPELO	MS	38801

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AFFORDABLE FURNITURE MFG CO INC**

Occupation  
**FURNITURE MANUFACTURING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127141**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1576 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GRETCHEN SNELL-BIGL**

Mailing Address 3729 CINIZA DRIVE

City	State	Zip Code
GALLUP	NM	87301

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCKINLEY MEDICAL SUPPLY

Occupation  
RESPIRATORY THERAPIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.127143**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

750.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID SNODGRASS**

Mailing Address 10205 E. SHADYBROOK

City	State	Zip Code
WICHITA	KS	67206

FEC ID number of contributing federal political committee.

C

Name of Employer  
SNODGRASS & SONS CONST. CO.

Occupation  
CONTRACTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127144**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET SNOW**

Mailing Address 305 S ANITA AVE

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127145**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1577 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT SNOW**

Mailing Address **6181 RACEL ST**

City State Zip Code  
**LAS VEGAS NV 89131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127147**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM SNYDER**

Mailing Address **1805 18TH AVE SE**

City State Zip Code  
**OLYMPIA WA 98501**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127149**

Date of Receipt

**08 / 09 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN SODERBERG**

Mailing Address **550 PINE RIDGE CT**

City State Zip Code  
**NEW RICHMOND WI 54017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FIRST NATIONAL COMMUNITY BAN**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.127151**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1050.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1578 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT SOERENS**

Mailing Address 16415 W WISCONSIN AV

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
SOERENS FORD

Occupation  
AUTO DEALER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.127153**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEFF SOHN**

Mailing Address N5764 CTH TT PO BOX 118

City	State	Zip Code
SHEBOYGAN FALLS	WI	53085

FEC ID number of contributing federal political committee.

C

Name of Employer  
JSM COMMUNICATIONS, INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127154**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RAY SOILEAU**

Mailing Address 14 S BLUFF RD

City	State	Zip Code
CHATTANOOGA	TN	37419

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.00

**Transaction ID : SA17A.127156**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

403.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2503.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1579 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEPHEN SOILEAU**

Mailing Address 318 BOSWORTH LN

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SC JOHNSON

Occupation  
TOXICOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127158**

Date of Receipt

**07 / 15 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN SOILEAU**

Mailing Address 318 BOSWORTH LN

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SC JOHNSON

Occupation  
TOXICOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127159**

Date of Receipt

**07 / 15 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J.C. SOLENBERGE**

Mailing Address 5 WOOD RD

City	State	Zip Code
WILMINGTON	DE	19806

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127161**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1580 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD SOLESKI**

Mailing Address 13613 N GRANDVILLE ROAD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127163**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD SOLESKI**

Mailing Address 13613 N GRANDVILLE ROAD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127164**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWARD SOLESKI**

Mailing Address 13613 N GRANDVILLE ROAD

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
ENGINEER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127165**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

350.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1581 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**STEVEN SOLFERINO**

Mailing Address **56 3RD ST**

City State Zip Code  
**GARDEN CITY NY 11530**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ONYX PACKAGING CORPORATION**

Occupation  
**VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127167**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GWEN SOLOWICZ**

Mailing Address **1599 HIGHLAND DRIVE**

City State Zip Code  
**LAKE GENEVA WI 53147**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127169**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DIANNE M SOMERS**

Mailing Address **292 MAPLE BLUFF ROAD**

City State Zip Code  
**STEVENS POINT WI 54482**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1413.75**

**Transaction ID : SA17A.127171**

Date of Receipt

**08 / 28 / 2015**

Amount of Each Receipt this Period

**1413.75**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2663.75**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1582 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANIEL E SOMES**

Mailing Address 1850 PASEO DEL LAGO

City	State	Zip Code
VERO BEACH	FL	32967

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127173**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLYNDOL R SONES**

Mailing Address 990 BAYVIEW AVE

City	State	Zip Code
PACIFIC GROVE	CA	93950

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127175**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROLYN M SONNENTAG**

Mailing Address PO BOX 435

City	State	Zip Code
ASTATULA	FL	34705

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127177**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1583 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLYN M SONNENTAG**

Mailing Address PO BOX 435

City

ASTATULA

State

FL

Zip Code

34705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127178**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN SONNENTAG**

Mailing Address P.O. BOX 435

City

ASTATULA

State

FL

Zip Code

34705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127180**

Date of Receipt

**08 / 10 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER M SONTAG**

Mailing Address 2399 HILLCREEK CIR E

City

CLEARWATER

State

FL

Zip Code

33759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127182**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1584 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PRISCILL SOPCHIK**

Mailing Address 5033 N HOLLYWOOD AVE

City	State	Zip Code
WHITEFISH BAY	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127184**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HARRY SOPHER**

Mailing Address 276 JIM DWIRE RD

City	State	Zip Code
BRISTOL	VT	05443

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.127186**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARY SORENSON**

Mailing Address 7821 E NOPAL AVE

City	State	Zip Code
MESA	AZ	85209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127188**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

703.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1585 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY SORENSON**

Mailing Address 7821 E NOPAL AVE

City	State	Zip Code
MESA	AZ	85209

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127189**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHAWN SOSNIK**

Mailing Address 2018 LAKE END ROAD

City	State	Zip Code
MERRICK	NY	11566

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127191**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD SOUKOUP**

Mailing Address 2112 HUNTINGTON POIN

City	State	Zip Code
WAYZATA	MN	55391

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127193**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT SOUTHARD**

Mailing Address 2700 POST OAK BLVD.  
SUITE 1400

City State Zip Code  
HOUSTON TX 77056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EVERTSONINTERNATIONAL.COM

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127195**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT SOUTHARD**

Mailing Address 2700 POST OAK BLVD.  
SUITE 1400

City State Zip Code  
HOUSTON TX 77056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EVERTSONINTERNATIONAL.COM

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.127196**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRENT SOUTHWELL**

Mailing Address 3655 GLEN HAVEN BOULEVARD

City State Zip Code  
HOUSTON TX 77025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PJS OF HOUSTON

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127198**

Date of Receipt

M M / D D / Y Y Y Y  
06 19 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENT SOUTHWELL**

Mailing Address 3655 GLEN HAVEN BOULEVARD

City	State	Zip Code
HOUSTON	TX	77025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PJS OF HOUSTON

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127198.0**

Date of Receipt

**06** / **19** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KELLEY SOUTHWELL**

Mailing Address 3655 GLEN HAVEN BOULEVARD

City	State	Zip Code
HOUSTON	TX	77025

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127198.1**

Date of Receipt

**06** / **19** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CRAIG SOWER**

Mailing Address 1676-3 KASAOKA

City	State	Zip Code
KASAOKA, OKAYAMA JAPAN	ZZ	99999

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SHUJITSU UNIVERSITY

Occupation  
PROFESSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127200**

Date of Receipt

**06** / **23** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL SPAIN**

Mailing Address 395 W NORTHWEST PKWY #300

City	State	Zip Code
SOUTHLAKE,	TX	76092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127202**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABETH SPALDING**

Mailing Address 724 FOREST AVE.

City	State	Zip Code
WILMETTE	IL	60091

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127204**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JENIFER K SPANGENBER**

Mailing Address 3317 W PINE ST

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127206**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN SPANGLER**

Mailing Address **BOX 711282**

City	State	Zip Code
SALT LAKE CITY	UT	84171

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127207**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID SPANO**

Mailing Address **12705 ELMWOOD ROAD**

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ANNEX WEALTH MANAGEMENT**

Occupation  
**FINANCIAL ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127209**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BEN SPARKMAN**

Mailing Address **3917 MCFARLIN BLVD**

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127211**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1590 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES SPEAR**

Mailing Address 3725 TOBIAS LANE

City	State	Zip Code
LAS VEGAS	NV	89120

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SHOWTIME CARWASH INC

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127213**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVE SPENCE**

Mailing Address 2021 SOUTH WARSON ROAD

City	State	Zip Code
ST. LOUIS	MO	63124

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127215**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AARON SPENCER**

Mailing Address 7607 GRANITE AVE

City	State	Zip Code
ORANGEVALE	CA	95662

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SPENCER BLDG. MA., INC.

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127217**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1591 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABET A SPENCER**

Mailing Address PO BOX 1717

City

EAGLE RIVER

State

WI

Zip Code

54521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127219**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KIRK SPESSARD**

Mailing Address 1090 ALABAMA STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127221**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 01 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS SPIKER**

Mailing Address 245 CITATION DR

City

HENRIETTA

State

NY

Zip Code

14467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FUNCTION5 TECHNOLOGY GROUP LTD

Occupation

CONTROLLER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127222**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT SPINDELL**

Mailing Address **1626 N PROSPECT AVENUE**

City <b>MILWAUKEE</b>	State <b>WI</b>	Zip Code <b>53202</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SPINDELL GROUP LLC**

Occupation  
**MERGER & ACQUISITION INTERMEDIARY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1350.00**

**Transaction ID : SA17A.127224**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**1350.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT SPINHIRNE**

Mailing Address **1982 RT 73 N**

City <b>LENA</b>	State <b>IL</b>	Zip Code <b>61048</b>
---------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127226**

Date of Receipt

M M / D D / Y Y Y Y
08 / 26 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN SPIRES**

Mailing Address **307 WINDRIDGE DR**

City <b>WEST MONROE</b>	State <b>LA</b>	Zip Code <b>71291</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127228**

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1850.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1593 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HORTON SPITZER**

Mailing Address PO BOX 1307

City	State	Zip Code
WILSON	WY	83014

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127230**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRENT ST.JOHN**

Mailing Address 336 HAWTHORNE AVE

City	State	Zip Code
SAINT LOUIS	MO	63119

FEC ID number of contributing federal political committee.

C

Name of Employer  
HAMPDEN HOLDINGS LLC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127232**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNIS STAALAND**

Mailing Address 10053 RELLSWOOD DRIVE

City	State	Zip Code
BELVIDERE	IL	61008

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127234**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		30		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1150.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1594 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TIM STACY**

Mailing Address **7825 WESTLAND DR**

City	State	Zip Code
KNOXVILLE	TN	37919

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SFG**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127236**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK STALNECKER**

Mailing Address **55 SELBORNE DR**

City	State	Zip Code
WILMINGTON	DE	19807

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127238**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEN STANCLIFF**

Mailing Address **11614 OSPREY POINTE BLVD**

City	State	Zip Code
CLERMONT	FL	34711

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127240**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1595 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAN STANFORD**

Mailing Address 1494 UNION STREET, SUITE 107

City	State	Zip Code
SAN DIEGO	CA	92101

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.127242**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN STANFORD**

Mailing Address 410 13TH AVE N

City	State	Zip Code
SURFSIDE BEACH	SC	29575

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127244**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GREG STANGL**

Mailing Address PO BOX 29166

City	State	Zip Code
SAN FRANCISCO	CA	94129

FEC ID number of contributing federal political committee.

C

Name of Employer  
PHOENIX ENERGY

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127246**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1596 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICK STANGL**

Mailing Address **6441 ENTERPRISE LANE, STE109**

City	State	Zip Code
MADISON	WI	53719

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STANGL LAW OFFICES, S.C.**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127248**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL STANGL**

Mailing Address **326 CEDAR SAUK ROAD**

City	State	Zip Code
WEST BEND	WI	53095

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RAFFEL SYSTEMS**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127250**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN STANKO**

Mailing Address **12785 SILVER WOLF RD**

City	State	Zip Code
RENO	NV	89511

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CHAMPION CHEVROLET**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127252**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	5

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1597 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD STANLEY**

Mailing Address **5 SUGAR HILL DRIVE**

City	State	Zip Code
NASHUA	NH	03063

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STANLEY INC**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127254**

Date of Receipt

**08 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROB STANLEY**

Mailing Address **1160 E LAKERIDGE DR**

City	State	Zip Code
FAYETTEVILLE	AR	72703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LINDSEY MANAGEMENT CO., INC.**

Occupation  
**SR. VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127256**

Date of Receipt

**06 / 27 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROB STANLEY**

Mailing Address **1160 E LAKERIDGE DR**

City	State	Zip Code
FAYETTEVILLE	AR	72703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**LINDSEY MANAGEMENT CO., INC.**

Occupation  
**SR. VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.127257**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1598 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****ROBERT J STANLEY**

Mailing Address 2584 N SHADOW CREST DRI

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127259**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			14			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****ROY E STANLEY**

Mailing Address 4872 PRESTWICK S CIRCLE

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127261**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			14			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****JANET STANSFIELD HESS**

Mailing Address 2213 QUARRY LANE

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STANSFIELD VENDING INCOccupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127263**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1599 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BERIT STANTON**

Mailing Address 116 E 68TH ST  
#

City State Zip Code  
NEW YORK NY 10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127265**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BERIT STANTON**

Mailing Address 116 E 68TH ST  
#

City State Zip Code  
NEW YORK NY 10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127266**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BERIT STANTON**

Mailing Address 116 E 68TH ST  
#

City State Zip Code  
NEW YORK NY 10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127267**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1600 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED STANTON**

Mailing Address 205 EAST 77TH STREET, PENTHOUSE C

City	State	Zip Code
NEW YORK	NY	10075

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
AUTHOR/FILM MAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127269**

Date of Receipt

MM / DD / YYYY  
06 / 19 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED STANTON**

Mailing Address 205 EAST 77TH STREET, PENTHOUSE C

City	State	Zip Code
NEW YORK	NY	10075

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
AUTHOR/FILM MAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127271**

Date of Receipt

MM / DD / YYYY  
08 / 04 / 2015

REFUNDED ON 2/11/2016

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACLYN STARR**

Mailing Address PO BOX 2887

City	State	Zip Code
CHELAN	WA	98816

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ELDERCARE PROVIDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127273**

Date of Receipt

MM / DD / YYYY  
06 / 22 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1601 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN STATHAM**

Mailing Address

City State Zip Code  
**BIRMINGHAM AL**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

**Transaction ID : SA17A.127275**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

**750.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM STAUBER**

Mailing Address **17270 FAIRPLAY DR**

City State Zip Code  
**MONUMENT CO 80132**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127276**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN STAUFFACHER**

Mailing Address **3534 BASALT LANE**

City State Zip Code  
**MADISON WI 53719**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CAPITOLAND**

Occupation  
**MINISTER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127278**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1050.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1602 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROGER STAUTER**

Mailing Address **3837 MONNONA DRIVE, APT**

City	State	Zip Code
MADISON	WI	53714

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STARK COMPANY REALTORS**

Occupation  
**REALTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127280**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GAYLORD STAVELEY**

Mailing Address **1117 E MARINA LN**

City	State	Zip Code
FLAGSTAFF	AZ	86004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CANYONEERS, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127282**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GAYLORD STAVELEY**

Mailing Address **1117 E MARINA LN**

City	State	Zip Code
FLAGSTAFF	AZ	86004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CANYONEERS, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127283**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1603 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GAYLORD STAVELEY**

Mailing Address 1117 E MARINA LN

City	State	Zip Code
FLAGSTAFF	AZ	86004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**CANYONEERS, INC.**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.127284**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAUNA STAYER MAL**

Mailing Address 1136 RIVERVIEW DR

City	State	Zip Code
SHEBOYGAN	WI	53083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127286**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZA STEDMAN**

Mailing Address PO BOX 7

City	State	Zip Code
HOUSTON	TX	77001

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127288**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1604 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ESTHER STEEGE**

Mailing Address 4600 FOREST AVE SE

City	State	Zip Code
MERCER ISLAND	WA	98040

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENTREPRENEUR**

Occupation  
**ENTREPRENEUR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.00

**Transaction ID : SA17A.127290**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

202.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD STEELE**

Mailing Address 5034 S 67TH ST

City	State	Zip Code
GREENFIELD	WI	53220

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127292**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID STEFFENS**

Mailing Address 602 SOUTH WESTERN ST.

City	State	Zip Code
LAKE MILLS	IA	50450

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NORSEMEN TRUCKING, INC.**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127294**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

952.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1605 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DUANE STEFFES**

Mailing Address 2121 TRAYNOR LANE

City	State	Zip Code
BISMARCK	ND	58504

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
PROFESSIONAL INSURANCE SERVICES INC	SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127296**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES STEIDEL**

Mailing Address 10040 E HAPPY VALLEY

City	State	Zip Code
SCOTTSDALE	AZ	85255

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127298**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREA STEIN**

Mailing Address 44 WEST 77TH STREET, APT 10E

City	State	Zip Code
NEW YORK	NY	44002

FEC ID number of contributing federal political committee.

**C**

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127300**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1606 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOSHUA STEIN**

Mailing Address 501 MADISON AVENUE, SUITE 402

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127301**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOSHUA STEIN**

Mailing Address 501 MADISON AVENUE, SUITE 402

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127302**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GERALD A STEINKE**

Mailing Address 1168 ROLLING LN

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STATE FUNERAL HOME, INC

Occupation  
MORTICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127304**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

500.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1607 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AARON STEINMANN**

Mailing Address W2885 COUNTY HWY KS / PO BOX 42

City	State	Zip Code
JUDA	WI	53550

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**L&S TRUCK SERVICE INC.**

Occupation  
**SERVICE WRITER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127306**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOBIAS STEIVANG**

Mailing Address 2013 N LAKESHORE DRIVE

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WALWORTH STATE BANK**

Occupation  
**CHAIRMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127308**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ERIK STENEHJEM**

Mailing Address 310 38TH AVE E

City	State	Zip Code
WEST FARGO	ND	58078

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FIRST INTERNATIONAL BANK AND TRUST**

Occupation  
**BANKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127310**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1608 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEFF STENTZ**

Mailing Address 1305 W MOUNTAIN AVE.

City	State	Zip Code
FORT COLLINS	CO	80521

FEC ID number of contributing federal political committee.

C

Name of Employer  
ABC SUPPLY CO., INC.

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127312**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY STEPHANI BLUE**

Mailing Address 14835 CLARE BRIDGE LANE

City	State	Zip Code
BROOKFIELD,	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127314**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUSAN STEPHANS**

Mailing Address 1001 NORTH 11TH STRE

T

City	State	Zip Code
TEMPLE	TX	00000

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127316**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1609 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM STEPHANS**

Mailing Address 8645 HUNTING HILL DR

City	State	Zip Code
MENTOR	OH	44060

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KIRBY VACUUM

Occupation  
INFORMATION TECHNOLOGY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127318**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREGORY STEPHENS**

Mailing Address 411 PEBBLE CT

City	State	Zip Code
RUSSIAVILLE	IN	46979

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STEPHENS MACHINE INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127320**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARRIET STEPHENS**

Mailing Address 1 LONGFELLOW PL

City	State	Zip Code
LITTLE ROCK	AR	72207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127322**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1610 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WARREN A STEPHENS**

Mailing Address **1 LONGFELLOW PL**

City	State	Zip Code
LITTLE ROCK	AR	72207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STEPHENS, INC**

Occupation  
**CHAIRMAN & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127324**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WARREN A STEPHENS**

Mailing Address **1 LONGFELLOW PL**

City	State	Zip Code
LITTLE ROCK	AR	72207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STEPHENS, INC**

Occupation  
**CHAIRMAN & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127325**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARBARA STEPHENSON**

Mailing Address **603 HICKORY STREET SE**

City	State	Zip Code
HARTSELLE	AL	35640

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127327**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1611 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONNA STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127328**

Date of Receipt

**07** / **06** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONNA STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.127329**

Date of Receipt

**07** / **13** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONNA STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127330**

Date of Receipt

**07** / **13** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1612 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONNA STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.127331**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YANCEY BROS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127332**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YANCEY BROS**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127333**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1613 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YANCEY BROS**

Occupation  
**PRESDIENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.127334**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YANCEY BROS**

Occupation  
**PRESDIENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127335**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES STEPHENSON**

Mailing Address PO BOX 43326

City	State	Zip Code
ATLANTA	GA	30336

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YANCEY BROS**

Occupation  
**PRESDIENT**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.127336**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1614 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LAWRENCE STEPHENSON**

Mailing Address 78 LOCH LEVEN RD.

City	State	Zip Code
LIVINGSTON	MT	59047

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127337**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUE ELLE E STEPHENSON**

Mailing Address N7797 LAKESHORE LN

City	State	Zip Code
SHERWOOD	WI	54169

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127339**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN STEPPE**

Mailing Address 54 SERRANO

City	State	Zip Code
ATHERTON	CA	94027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STOCKBRIDGE

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127341**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1615 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ALLISON STERN**

Mailing Address 925 5TH AVENUE

City	State	Zip Code
NEW YORK	NY	10021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127343**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ALLISON STERN**

Mailing Address 925 5TH AVENUE

City	State	Zip Code
NEW YORK	NY	10021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF-EMPLOYED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128744**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EDWARD STERN**

Mailing Address 291 CENTRAL PARK WEST, PENTHOUSE

City	State	Zip Code
NEW YORK	NY	10024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127345**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

8100.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1616 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GERALD F STERN**

Mailing Address **N19W22081 FOXVIEW CT**

City <b>WAUKESHA</b>	State <b>WI</b>	Zip Code <b>53186</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127347**

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEONARD STERN**

Mailing Address **925 5TH AVENUE**

City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10021</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128746**

Date of Receipt

M M / D D / Y Y Y Y
06 / 18 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAYNARD STETTEN**

Mailing Address **6020 SOUTH HIGHWAY 53**

City <b>SMITHFIELD</b>	State <b>KY</b>	Zip Code <b>40068</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.127348**

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**600.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1617 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DIANE STEVENS**

Mailing Address 10636 HEWITT RD

City	State	Zip Code
BROOKLYN	MI	49230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127350**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JONATHAN STEVENS**

Mailing Address PO BOX 353

City	State	Zip Code
CLARK FORK	ID	83811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127352**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARY L STEWART**

Mailing Address 734 N ELDORADO AVE

City	State	Zip Code
KLAMATH FALLS	OR	97601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127354**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

800.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1618 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD STEWART**

Mailing Address **1811 WARREN STREET**

City <b>NEW CUMBERLAND</b>	State <b>PA</b>	Zip Code <b>17070</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127356**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREG STICHA**

Mailing Address **5352 BAREFOOT BAY CT**

City <b>BONITA SPRINGS</b>	State <b>FL</b>	Zip Code <b>34134</b>
-------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127358**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VIRGINIA STICKELL**

Mailing Address **3619 VICTORY AVE**

City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89121</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127360**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1619 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREGORY STIEBER**

Mailing Address 723 CARPENTER RD.

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PUBLIC POLICY CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.127362**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARILYN STIGLITZ**

Mailing Address 232 BALTUSROL WAY

City	State	Zip Code
SPRINGFIELD	NJ	07081

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127364**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAWRENCE STILES**

Mailing Address 1505 N CAROLWOOD BLVD

City	State	Zip Code
FERN PARK	FL	32730

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127366**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

770.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1620 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EUGENIE STINE**

Mailing Address 729 ALBA DRIVE

City	State	Zip Code
ORLANDO	FL	32804

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127368**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK STINEBRINK**

Mailing Address N3776 BOWERS ROAD

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127370**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AVERY STIRRATT**

Mailing Address 204 INDIAN WATERS DRIVE

City	State	Zip Code
NEW CANAAN	CT	06840

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127372**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1621 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH STOCK**

Mailing Address **201 TRESSER BLVD**

City <b>STAMFORD</b>	State <b>CT</b>	Zip Code <b>06901</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FIRST FINANCIAL INVESTORS, INC**

Occupation  
**ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127374**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH STOCK**

Mailing Address **4696 GOLDEN POND PARK C**

City <b>ONEIDA</b>	State <b>WI</b>	Zip Code <b>54155</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127376**

Date of Receipt

M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**R. G STOEPLER**

Mailing Address **513 W HARBOUR CREST DR**

City <b>CHESNEE</b>	State <b>SC</b>	Zip Code <b>29323</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**235.00**

**Transaction ID : SA17A.127377**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

**110.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2110.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1622 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**R. G STOEPLER**

Mailing Address **513 W HARBOUR CREST DR**

City	State	Zip Code
CHESNEE	SC	29323

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**265.00**

**Transaction ID : SA17A.127378**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

Amount of Each Receipt this Period

**30.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN STOKER**

Mailing Address **12939 N. COBBLESTONE CT.**

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THE VICTORY COMPANIES OF  
WISCONSIN INC**

Occupation  
**GENERAL CONTRACTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127380**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			30			2015			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES E STOKES**

Mailing Address **2081 AUGUSTA DRIVE**

City	State	Zip Code
SAN ANGELO	TX	76904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127382**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**780.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1623 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LINDSEY W STOKES**

Mailing Address **5 COVINGTON LN**

City	State	Zip Code
SAINT LOUIS	MO	63132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127384**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TODD STOLPA**

Mailing Address **3517 SEQUOIA CIR**

City	State	Zip Code
WAUKESHA	WI	53188

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**G&V MACHINES**

Occupation  
**QUALITY CONTROL MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127386**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID STONE**

Mailing Address **24 LIBERTY STREET**

City	State	Zip Code
ACTON	MA	01720

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127388**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1624 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY STONE**

Mailing Address PO BOX 1331

City	State	Zip Code
SUN VALLEY	ID	83353

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RESTUARANT OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.127390**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD STONE**

Mailing Address 7212 N SHADELAND AVENUE SUITE 210

City	State	Zip Code
INDIANAPOLIS	IN	46250

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127392**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM G STONE**

Mailing Address 474 BEACHWOOD DR

City	State	Zip Code
LEXINGTON	SC	29072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127393**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

620.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1625 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE STONECLIFF**

Mailing Address 10962 NW LUCERNE CT

City	State	Zip Code
PORTLAND	OR	97229

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127395**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES L STONER**

Mailing Address P.O. BOX 129

City	State	Zip Code
WELCH	OK	74369

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127397**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD STORMONT**

Mailing Address 3747 PEACHTREE RD NE

7

City	State	Zip Code
BROOKHAVEN	GA	30319

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127399**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1750.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1626 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALT STOUFER**

Mailing Address 2300 MAPLE AVE #216

City	State	Zip Code
TORRANCE	CA	90503

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127401**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVE STOUGHTON**

Mailing Address 1080 CAMP HILL ROAD

City	State	Zip Code
FORT WASHINGTON	PA	19034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WORTH & COMPANY INC

Occupation  
MGR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127403**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHELLEY STOUT**

Mailing Address 12411 TOWNE RD

City	State	Zip Code
CARMEL	IN	46032

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.127405**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1203.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1627 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRANK STOVALL**

Mailing Address 4317 RICKENBACKER WAY N

City	State	Zip Code
ATLANTA	GA	30342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127407**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK STOWE**

Mailing Address 3305 BOONE DRIVE

City	State	Zip Code
LAGO VISTA	TX	78645

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NEWGEN STRATEGIES AND SOLUTIONS

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127409**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES L. STRANGE**

Mailing Address 4355 SHCKLEFORD ROAD

City	State	Zip Code
NORCROSS	GA	30093

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127411**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1628 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LEE STROBEL**

Mailing Address **10 JUNIPER GROVE PLACE**

City <b>THE WOODLANDS</b>	State <b>TX</b>	Zip Code <b>77382</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOUSTON BAPTIST UNIVERSITY**

Occupation  
**PROFESSOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127413**

Date of Receipt

**08 / 20 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROGER STRODE**

Mailing Address **2414 NORTH 88TH STREET**

City <b>WAUWATOSA</b>	State <b>WI</b>	Zip Code <b>53226</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FOLEY & LARDNER**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127415**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LESLIE STRONG**

Mailing Address **8707 GOLDEN GARDENS**

City <b>SEATTLE</b>	State <b>WA</b>	Zip Code <b>98117</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127417**

Date of Receipt

**08 / 10 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5900.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1629 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LESLIE STRONG**

Mailing Address **8707 GOLDEN GARDENS**

City	State	Zip Code
SEATTLE	WA	98117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127418**

Date of Receipt

**08 / 10 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LESLIE STRONG**

Mailing Address **8707 GOLDEN GARDENS**

City	State	Zip Code
SEATTLE	WA	98117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127419**

Date of Receipt

**08 / 10 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER STRONG**

Mailing Address **8707 GOLDEN GARDENS**

City	State	Zip Code
SEATTLE	WA	98117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COASTAL TRANSP**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127421**

Date of Receipt

**07 / 22 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1630 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER STRONG**

Mailing Address 8707 GOLDEN GARDENS

City	State	Zip Code
SEATTLE	WA	98117

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COASTAL TRANSP

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127422**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETER STRONG**

Mailing Address 8707 GOLDEN GARDENS

City	State	Zip Code
SEATTLE	WA	98117

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COASTAL TRANSP

Occupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127423**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN C STRONG**

Mailing Address PO BOX 15657

City	State	Zip Code
SACRAMENTO	CA	95852

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127425**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1631 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DIANE STROOBANTS**

Mailing Address **N2731 DRIFTWOOD BEACH R**

City	State	Zip Code
<b>CHILTON</b>	<b>WI</b>	<b>53014</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127427**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>25</b>		<b>2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARCHIE STRUTT**

Mailing Address **20685 DALE EVANS PKW**

City	State	Zip Code
<b>APPLE VALLEY</b>	<b>CA</b>	<b>92307</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**210.00**

**Transaction ID : SA17A.127428**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>11</b>		<b>2015</b>

Amount of Each Receipt this Period

**110.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES W STRZALKA**

Mailing Address **3756 N LEAVITT ST**

City	State	Zip Code
<b>CHICAGO</b>	<b>IL</b>	<b>60618</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127429**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>14</b>		<b>2015</b>

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1410.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1632 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY STULTZ**

Mailing Address 262 DEERFIELD CIRCLE

City	State	Zip Code
KINGWOOD	WV	26537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127431**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY STULTZ**

Mailing Address 262 DEERFIELD CIRCLE

City	State	Zip Code
KINGWOOD	WV	26537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127432**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT STUMP**

Mailing Address 2713 DOUDS RD

City	State	Zip Code
LIBERTYVILLE	IA	52567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127433**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1633 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM STYGAR**

Mailing Address 2200 LESTER DRIVE, NE, APT. 484

City	State	Zip Code
ALBUQUERQUE	NM	87112

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127435**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ANNE STYZA**

Mailing Address 6395 STATE ROAD 83

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HARMONY HOMES, INC.

Occupation  
BUILDER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127437**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BRYCE STYZA**

Mailing Address 6395 STATE ROAD 83

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BUILDER/DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127439**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

6400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1634 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRYCE STYZA**

Mailing Address 6395 STATE ROAD 83

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
BUILDER/DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127440**

Date of Receipt

**07** / **09** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREGORY SUCHAN**

Mailing Address 11607 BUNNELL COURT

City	State	Zip Code
POTOMAC	MD	20854

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
COMMONWEALTH CONSULTING CORPORATION

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127442**

Date of Receipt

**07** / **19** / **2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS W SUDBERRY**

Mailing Address 5465 MOREHOUSE DR

City	State	Zip Code
SAN DIEGO	CA	92121

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SUDBERRY PROPERTIES INC

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127444**

Date of Receipt

**07** / **27** / **2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1635 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD A SUGAR**

Mailing Address **785 5TH AVE**

City	State	Zip Code
<b>NEW YORK</b>	<b>NY</b>	<b>10022</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EAS ADVISORS**

Occupation  
**ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127446**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HERBERT SUGDEN JR**

Mailing Address **17800 SE237TH CT**

City	State	Zip Code
<b>UMATILLA</b>	<b>FL</b>	<b>32784</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127448**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HERBERT J SUGDEN JR**

Mailing Address **17800 SE 237TH CT**

City	State	Zip Code
<b>UMATILLA</b>	<b>FL</b>	<b>32784</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.127450**

Date of Receipt

**07 / 01 / 2015**

Amount of Each Receipt this Period

**225.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3175.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1636 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PETER SUHRE**

Mailing Address 40 PARRISH FARM ROAD

City	State	Zip Code
WAYNESVILLE	NC	28786

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127451**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET SULICK**

Mailing Address 3295 FORT CHARLES DR

City	State	Zip Code
NAPLES	FL	34102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CITY OF NAPLES

Occupation  
VICE MAYOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

253.00

**Transaction ID : SA17A.127453**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

253.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALFRED SULLIVAN**

Mailing Address 4441 86TH AVE SE

City	State	Zip Code
MERCER ISLAND	WA	98040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
FINANCIAL MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127455**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

703.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1637 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HARLEY SULLIVAN**

Mailing Address 351 MARIPOSA LOOP

City	State	Zip Code
NEW BRAUNFELS	TX	78132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127457**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES SULLIVAN**

Mailing Address 440 W ANTHONY DR.

City	State	Zip Code
CHAMPAIGN	IL	61822

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127459**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KIMBERLY SULLIVAN**

Mailing Address 605 N 79TH STREET

City	State	Zip Code
WAUWATOSA	WI	53213

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127461**

Date of Receipt

**07 / 07 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1638 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARIE SULLIVAN**

Mailing Address 5001 CONVICT HILL RD. #307

City	State	Zip Code
AUSTIN	TX	78749

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127463**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**OWEN SULLIVAN**

Mailing Address 15 WINDEMERE AVE

City	State	Zip Code
STATEN ISLAND	NY	10306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127465**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANN SUMMER**

Mailing Address 8625 BRAESWOOD PT. APT. 6

City	State	Zip Code
COLORADO SPRINGS	CO	80920

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127466**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1639 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANN SUMMER**

Mailing Address 8625 BRAESWOOD PT. APT. 6

City	State	Zip Code
COLORADO SPRINGS	CO	80920

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127467**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRET SUMNER**

Mailing Address 2325 STRATFORD WAY

City	State	Zip Code
HIGHLANDS RAN	CO	80126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BEATTY & WOZNIAK, P.C.L

Occupation  
OIL AND GAS ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127469**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEREMIAH SUPPLE**

Mailing Address 200 ACACIA

City	State	Zip Code
LAFAYETTE	LA	70508

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127471**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1640 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICK R SUPRISE**

Mailing Address 136 PINE COURT

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

C

Name of Employer  
VALLEY FINANCIAL

Occupation  
FINANCIAL PLANNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127473**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK R SUPRISE**

Mailing Address 136 PINE COURT

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

C

Name of Employer  
VALLEY FINANCIAL

Occupation  
FINANCIAL PLANNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.127474**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAN SUTTE**

Mailing Address 119 TERRACE DR

City	State	Zip Code
LAKE GENEVA	WI	53147

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127476**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1641 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DANNIS SUTTON**

Mailing Address 59-063 PUKEA RD

City	State	Zip Code
HALEIWA	HI	96712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127477**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROY SUTTON**

Mailing Address 14 HALFWAY ROAD

City	State	Zip Code
KEY LARGO,	FL	33037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127479**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTYNE SUTTON OLSON**

Mailing Address 2955 MAIN STREET, STE 300

City	State	Zip Code
IRVINE	CA	92614

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128733**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1642 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH A SVADBA**

Mailing Address 403 MANORSTONE LN

City	State	Zip Code
CLARKSVILLE	TN	37042

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NORTH CENTRAL INSTITUTE

Occupation  
INSTRUCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127481**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEITH A SVADBA**

Mailing Address 403 MANORSTONE LN

City	State	Zip Code
CLARKSVILLE	TN	37042

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NORTH CENTRAL INSTITUTE

Occupation  
INSTRUCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

**Transaction ID : SA17A.127482**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID SWAIN**

Mailing Address 17258 E MELODY LN

City	State	Zip Code
GILBERT	AZ	85234

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SWAIN ELECTRIC INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127484**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

350.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

875.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1643 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID SWAIN**

Mailing Address 17258 E MELODY LN

City	State	Zip Code
GILBERT	AZ	85234

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SWAIN ELECTRIC INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

875.00

**Transaction ID : SA17A.127485**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2015

Amount of Each Receipt this Period

525.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RODNEY SWAN**

Mailing Address PO BOX

City	State	Zip Code
PRESQUE ISLE	WI	54557

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ORTHOPEDIC SOLUTIONS INC

Occupation  
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127487**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOSEPH D SWANN**

Mailing Address 22 CRAIGWOOD CT

City	State	Zip Code
GREENVILLE	SC	29607

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127489**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4225.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1644 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BONNIE J SWANSON**

Mailing Address 6500 RIVER MEADOWS TURN

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127491**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALD R SWANSON**

Mailing Address PO BOX 369

City	State	Zip Code
MEDINA	WA	98039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127493**

Date of Receipt

**08 / 06 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT J SWANSON**

Mailing Address 6500 RIVER MEADOWS TURN

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127495**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1645 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE SWARTS**

Mailing Address 2720 TIOGA PINES CIRCLE

City	State	Zip Code
LAS VEGAS	NV	89117

FEC ID number of contributing federal political committee.

C

Name of Employer  
SWARTS & SWARTS, CPAS

Occupation  
CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127497**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK SWEENEY**

Mailing Address P.O. BOX 49159

City	State	Zip Code
TAMPA	FL	33646

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127499**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH J SWEET**

Mailing Address 4045 SOUTH 54TH STREET

City	State	Zip Code
MILWAUKEE	WI	53220

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127500**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1646 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANNETTE E SWENSON**

Mailing Address 36 GAME COCK RD

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127502**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT A SWENSON**

Mailing Address 218 BRAKEFIELD DR

City	State	Zip Code
JANESVILLE	WI	53546

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127504**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**VALERIE L SWENSON**

Mailing Address 705 SUNNYSLOPE RD

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
THE HOME LIQUIDATOR

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127506**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1647 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL R SWETT**

Mailing Address 4061 HAYES ST UNIT 42

City	State	Zip Code
NEWBERG	OR	97132

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127508**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHARON SWIFT**

Mailing Address 433 RENDEZVOUS RD

City	State	Zip Code
RIVERTON	WY	82501

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127510**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIM SWIGOR**

Mailing Address 126 FRONT ST

City	State	Zip Code
MARBLEHEAD	MA	01945

FEC ID number of contributing federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127512**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1648 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FLIP SZOLD**

Mailing Address **6529 CAMINITO ESTRELLADO**

City	State	Zip Code
SAN DIEGO	CA	92120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127514**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAWN A TABAT**

Mailing Address **8238 LIVORNO DR**

City	State	Zip Code
ORLANDO	FL	32836

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127516**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JANET TAGUE**

Mailing Address **15 ALTA MADERA AVE**

City	State	Zip Code
CARMEL	CA	93923

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127518**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1649 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANET TAGUE**

Mailing Address 15 ALTA MADERA AVE

City	State	Zip Code
CARMEL	CA	93923

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

**Transaction ID : SA17A.127519**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK TAKERIAN**

Mailing Address 8608 RIVER TERRACE DRIVE

City	State	Zip Code
FRANKLIN	WI	53132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
YMCA OF MILWAUKEE

Occupation  
CHIEF OPERATING OFFICE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127521**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BRENDA L TALENT**

Mailing Address 1470 COUNTRY LAKE ES

City	State	Zip Code
CHESTERFIELD	MO	63005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SHOW-ME INSTITUTE

Occupation  
EXEC. DIRETOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127523**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1650 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRENDA L TALENT**

Mailing Address 1470 COUNTRY LAKE ES

City	State	Zip Code
CHESTERFIELD	MO	63005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SHOW-ME INSTITUTE**

Occupation  
**EXEC. DIRETOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127524**

Date of Receipt

**07** / **29** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIM TALENT**

Mailing Address 1470 COUNTRY LAKE ES

City	State	Zip Code
CHESTERFIELD	MO	63005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127526**

Date of Receipt

**07** / **29** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**G R TALLEY**

Mailing Address 5410 E. 80TH STREET

City	State	Zip Code
TULSA	OK	74136

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PRIMARY NATURAL RESOURCES**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127528**

Date of Receipt

**07** / **13** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1651 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANE TANIS**

Mailing Address **W2251 COUNTRY CLUB LANE**

City	State	Zip Code
<b>EAST TROY</b>	<b>WI</b>	<b>53120</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**330.00**

**Transaction ID : SA17A.127530**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>18</b>		<b>2015</b>

Amount of Each Receipt this Period

**330.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEONARD TANNENBAUM**

Mailing Address **777 WEST PUTNAM AVE., 3RD FL**

City	State	Zip Code
<b>GREENWICH</b>	<b>CT</b>	<b>06830</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FSC CT LLC**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127532**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>06</b>		<b>23</b>		<b>2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STACEY TANNENBAUM**

Mailing Address **4 OLD ROUND HILL LANE**

City	State	Zip Code
<b>GREENWICH</b>	<b>CT</b>	<b>06831</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FIFTH STREET**

Occupation  
**VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127534**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>06</b>		<b>29</b>		<b>2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5730.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1652 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATTHEW TANNER**

Mailing Address **615 LAURER AVENUE**

City	State	Zip Code
<b>WILMETTE</b>	<b>IL</b>	<b>60091</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127536**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MAX TANNER**

Mailing Address **4128 WALNUT MEADOW LN**

City	State	Zip Code
<b>DALLAS</b>	<b>TX</b>	<b>75229</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127537**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTONY TAQUEY**

Mailing Address **PO BOX 26544**

City	State	Zip Code
<b>WINSTON SALEM</b>	<b>NC</b>	<b>27114</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.127539**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**553.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1653 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BYRON TARNUTZER**

Mailing Address PO BOX 8226

City	State	Zip Code
NEWPORT BEACH	CA	92658

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TARNUTZER COMPANIES**

Occupation  
**INVESTMENTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127541**

Date of Receipt

**06 / 24 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID L TATGE**

Mailing Address 4591 BRINEY POINT ROAD

City	State	Zip Code
LA VERNE	CA	91750

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**SELF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.127543**

Date of Receipt

**07 / 16 / 2015**

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LOUIS TAVARES**

Mailing Address 13527 LAKE CAWOOD DRIVE

City	State	Zip Code
WINDERMERE	FL	34786

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SCM ASSOCIATES**

Occupation  
**VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2701.00

**Transaction ID : SA17A.127544**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3170.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1654 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUE TAVARES**

Mailing Address 589 PRATHER ROAD

City	State	Zip Code
GRIDLEY	CA	95948

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127546**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BETHANY TAYLOR**

Mailing Address 166 LOON POND RD

City	State	Zip Code
GILMANTON	NH	03237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127548**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL TAYLOR**

Mailing Address S23W27100 SHANANAGI LN

City	State	Zip Code
WAUKESHA	WI	53188

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127550**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLINE TAYLOR**

Mailing Address **2 ST SIMONS SQ**

City

**GREENSBORO**

State

**NC**

Zip Code

**27408**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**INFORMATION REQUESTED**

Occupation

**INFORMATION REQUESTED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127552**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CRAIG TAYLOR**

Mailing Address **600 N. MARIENFELD, SUITE 1020**

City

**MIDLAND**

State

**TX**

Zip Code

**79701**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**TAYLOR NATURAL RESOURCES, INC.**

Occupation

**PRESIDENT**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.127554**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEREK TAYLOR**

Mailing Address **7021 N PURDY PKWY**

City

**APPLETON**

State

**WI**

Zip Code

**54913**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**INFORMATION REQUESTED**

Occupation

**INFORMATION REQUESTED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127556**

Date of Receipt

**07 / 22 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1656 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DON L TAYLOR**

Mailing Address P.O. BOX 648

City	State	Zip Code
WAUKESHA	WI	53187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WAUKESHA STATE BANK

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127558**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DON L TAYLOR**

Mailing Address P.O. BOX 648

City	State	Zip Code
WAUKESHA	WI	53187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WAUKESHA STATE BANK

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.127559**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DON L TAYLOR**

Mailing Address P.O. BOX 648

City	State	Zip Code
WAUKESHA	WI	53187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WAUKESHA STATE BANK

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127559.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-1000.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1657 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL TAYLOR**

Mailing Address P.O. BOX 648

City State Zip Code  
WAUKESHA WI 53187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127559.1**

Date of Receipt

M M / D D / Y Y Y Y  
08 19 2015

REATTRIBUTED

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HARRY TAYLOR**

Mailing Address 1953 S VIEW DR

City State Zip Code  
FORT COLLINS CO 80524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127560**

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HARRY TAYLOR**

Mailing Address 1953 S VIEW DR

City State Zip Code  
FORT COLLINS CO 80524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127561**

Date of Receipt

M M / D D / Y Y Y Y  
08 19 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1658 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN TAYLOR**

Mailing Address **2404 SW 113TH TERRACE**

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FEDERAL AVIATION ADMIN.**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127563**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT TAYLOR**

Mailing Address **307 WINDSOR DR**

City	State	Zip Code
DEKALB	IL	60115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WALMART**

Occupation  
**PHARMACIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127565**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT TAYLOR**

Mailing Address **842 N WILCREST DR**

City	State	Zip Code
HOUSTON	TX	77079

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RG TAYLOR II P.C & ASSOCIATES**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127567**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1659 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TY TAYLOR**

Mailing Address **S40W28091 STATE ROAD**

City <b>WAUKESHA</b>	State <b>WI</b>	Zip Code <b>53189</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WAUKESHA STATE BANK**

Occupation  
**BANKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127569**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 14 / 2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM C TAYLOR**

Mailing Address **400 LAFAYETTE CLOSE**

City <b>ROSWELL</b>	State <b>GA</b>	Zip Code <b>30075</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MIMEDX GROUP**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127571**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 17 / 2015</b>

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PETER TCHEREPNIN**

Mailing Address **125 BROAD ST**  
**N**

City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10004</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LOEB PARTNERS CORP**

Occupation  
**EXECUTIVE VP**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17A.127573**

Date of Receipt

M M / D D / Y Y Y Y
<b>07 / 23 / 2015</b>

Amount of Each Receipt this Period

**2000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5700.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1660 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM TEDFORD**

Mailing Address **5607 HAWTHORNE ROAD**

City	State	Zip Code
LITTLE ROCK	AR	72207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127575**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREG TEETERS**

Mailing Address **1651 CAPLIS SLIGO RD**

City	State	Zip Code
BOSSIER CITY	LA	71112

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SOFTWARE & SERVICES**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.127577**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES TEGAN**

Mailing Address **410 FERNDAL RD N**

City	State	Zip Code
PLYMOUTH	MN	55447

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TEGAN MARKETING, INC.**

Occupation  
**VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127579**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2000.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1661 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL TEMPEST**

Mailing Address 4944 S MARILYN DR

City	State	Zip Code
HOLLADAY	UT	84117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ALTA CAPITAL MANAGEMENT

Occupation  
FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127581**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GEORGE TEMPLETON**

Mailing Address 313 BEN FRANKLIN DR.

City	State	Zip Code
SARASOTA	FL	34236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127583**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANTHONY TERLATO**

Mailing Address 1521 TARA LN

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TERALTO WINE GROUP

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.127585**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1662 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD M TERRY**

Mailing Address 3105 ASHFORD LN

City	State	Zip Code
MADISON	WI	53713

FEC ID number of contributing federal political committee.

C

Name of Employer  
SVA CERTIFIED PUBLIC

Occupation  
CPA PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127587**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID TESTA**

Mailing Address 9585 SE 136TH PL

City	State	Zip Code
SUMMERFIELD	FL	34491

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127589**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD F TESTWUIDE**

Mailing Address N7863 LAKESIDE PARK ROA

City	State	Zip Code
ELKHART LAKE	WI	53020

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127591**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1663 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TOM TESTWUIDESR**

Mailing Address 7103 PROCTOR RD.

City	State	Zip Code
SARASOTA	FL	34241

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SKANA ALUMINUM CO.**

Occupation  
**BUSINESS EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127593**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM TETREALT**

Mailing Address 186 NASSAU AVE

City	State	Zip Code
FREEPORT	NY	11520

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YONKERS YMCA**

Occupation  
**CHRISTIAN AND FAMILY OUTREACH CO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127595**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM TETREALT**

Mailing Address 186 NASSAU AVE

City	State	Zip Code
FREEPORT	NY	11520

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YONKERS YMCA**

Occupation  
**CHRISTIAN AND FAMILY OUTREACH CO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127596**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA THEBERGE**

Mailing Address P.O. BOX 181289

City	State	Zip Code
CORONADO	CA	92178

FEC ID number of contributing federal political committee.

C

Name of Employer  
MANAGEMENT GROUP OF CORONADO

Occupation  
PROPERTY MGMT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127598**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEVE THELEN**

Mailing Address 42720 N CONVERSE RD

City	State	Zip Code
ANTIOCH	IL	60002

FEC ID number of contributing federal political committee.

C

Name of Employer  
THELEN SAND AND GRAVEL INC.

Occupation  
CORPORATE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127600**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD THEODORE**

Mailing Address 210 N 3RD AVE

City	State	Zip Code
BIG RAPIDS	MI	49307

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127602**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1665 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM THIEDE**

Mailing Address 1757 HIDDEN CREEK LN

City	State	Zip Code
BELVIDERE	IL	61008

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
POWMET, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127604**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS THIEMAN**

Mailing Address 100 GILBERG ST

City	State	Zip Code
NEW BREMEN	OH	45869

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127606**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TOM THIEMAN**

Mailing Address 100 GILBERG ST

City	State	Zip Code
NEW BREMEN	OH	45869

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127608**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TOM THIEMAN**

Mailing Address 100 GILBERG ST

City

NEW BREMEN

State

OH

Zip Code

45869

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127609**

Date of Receipt

07

30

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID THIES**

Mailing Address 7250 LEWIS RIDGE PKW

City

EDINA

State

MN

Zip Code

55439

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THIES & TALLE ENTERPRISES

Occupation

REAL ESTATE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127611**

Date of Receipt

07

23

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL THOMAS**

Mailing Address 307 BUCKEYE TRAIL

City

AUSTIN

State

TX

Zip Code

78746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127613**

Date of Receipt

07

24

2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1667 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TRACY THOMAS**

Mailing Address 4521 E CHARLES DR

City	State	Zip Code
PARADISE VALL	AZ	85253

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127615**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ADELLA THOMPSON**

Mailing Address 13205 VIRTUE RD

City	State	Zip Code
LENOIR CITY	TN	37772

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
FINE ART PHOTOGRAPHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127617**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DOUGLAS THOMPSON**

Mailing Address 852 WATERTHRUSH LANE

City	State	Zip Code
CHATTANOOGA	TN	37419

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127619**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWARD A THOMPSON**

Mailing Address 1350 FOX RIVER DR

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127621**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GLENDA THOMPSON**

Mailing Address 6027 HIGHWAY 261

City	State	Zip Code
MARIANNA	AR	72360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
R.T. TURBINES, INC.

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127623**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES THOMPSON**

Mailing Address 1214 TULIP TREE LN

City	State	Zip Code
WEST DES MOINES	IA	50266

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STONE CREEK HOSPITALITY

Occupation  
BUSINESSMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127625**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1669 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES THOMPSON**

Mailing Address 1214 TULIP TREE LN

City	State	Zip Code
WEST DES MOINES	IA	50266

FEC ID number of contributing federal political committee.

C

Name of Employer  
STONEY CREEK HOSPITALITY

Occupation  
BUSINESSMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.127626**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES THOMPSON**

Mailing Address 12 FAIRWAY VILLAGE LANE

City	State	Zip Code
ISLE OF PALMS	SC	29451

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

**Transaction ID : SA17A.127628**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

525.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAREN THOMPSON**

Mailing Address 120 FOXGLEN LN

City	State	Zip Code
ANDERSONVILLE	TN	37705

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127629**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1625.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1670 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN THOMPSON**

Mailing Address 26782 SHOEMAKER RD

City	State	Zip Code
CIRCLEVILLE	OH	43113

FEC ID number of contributing federal political committee.

C

Name of Employer  
T & D THOMPSON

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127631**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KENNETH A THOMPSON**

Mailing Address 50 STATE RT 206

City	State	Zip Code
YERINGTON	NV	89447

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127633**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KENNETH A THOMPSON**

Mailing Address 50 STATE RT 206

City	State	Zip Code
YERINGTON	NV	89447

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.127634**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN THOMPSON**

Mailing Address 248 WAGNER RD

City	State	Zip Code
NORTHFIELD	IL	60093

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127636**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAURA THOMSON**

Mailing Address 121 N CROSS ST  
APT. 140

City	State	Zip Code
WHEATON	IL	60187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.127637**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAURA THOMSON**

Mailing Address 121 N CROSS ST  
APT. 140

City	State	Zip Code
WHEATON	IL	60187

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.127638**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Receipt this Period

10.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

520.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID THORNTON**

Mailing Address 13 CIRCLE ROCK DRIVE

City	State	Zip Code
EPHRATA	PA	17522

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127640**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN THORNTON**

Mailing Address S85W32611 JOSHUA DR.

City	State	Zip Code
MUKWONAGO	WI	53149

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
GS GLOBAL RESOURCES, INC.

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127642**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ENOCH THORSgard**

Mailing Address 325 39TH STREET NE

City	State	Zip Code
NORTHWOOD	ND	58267

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

**Transaction ID : SA17A.127643**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1673 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ENOCH THORSgard**

Mailing Address 325 39TH STREET NE

City	State	Zip Code
NORTHWOOD	ND	58267

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

**Transaction ID : SA17A.127644**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

55.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PAUL THRIFT**

Mailing Address 901 WABASH AVENUE, SUIT

City	State	Zip Code
TERRE HAUTE	IN	47807

FEC ID number of contributing federal political committee.

C

Name of Employer  
THOMPSON THRIFT

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127646**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WILLIAM THROOP**

Mailing Address PO BOX 5576

City	State	Zip Code
CLEARLAKE	CA	95422

FEC ID number of contributing federal political committee.

C

Name of Employer  
CALPINE CORPORATION

Occupation  
SUPPORT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127648**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3755.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1674 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENTON THURMAN**

Mailing Address PO BOX 2819

City	State	Zip Code
KIRKLAND	WA	98083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THURMAN INDUSTRIES**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127650**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TOM THURMAN**

Mailing Address 631 RINGWOOD ST

City	State	Zip Code
SPRING	TX	77373

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**YEZAKTECHNICAL**

Occupation  
**SR. STRUCTURAL DESIGNER OIL & GA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127652**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT N. TIBALLI**

Mailing Address PO BOX 5934

City	State	Zip Code
ELGIN	IL	60121

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**GERMBUSTERS, P.C.**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127654**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1675 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABETH TILDEN**

Mailing Address 1308 SUMMERHILL DRIVE

City	State	Zip Code
MALVERN	PA	19355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127656**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD TILLEY**

Mailing Address 14610 WOODLAKE TRACE

City	State	Zip Code
LOUISVILLE	KY	40245

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RADIO SOUND, INC.

Occupation  
EXECUTIVE/OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127658**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARNER TILLMAN**

Mailing Address 1203 HIGHGATE CT

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127659**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1676 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN TIMM**

Mailing Address 351 PLOVER ST

City	State	Zip Code
WISCONSIN RAP	WI	54494

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127661**

Date of Receipt

**08 / 03 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY B TIPP**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127663**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HENRY B TIPP**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : SA17A.127664**

Date of Receipt

**08 / 23 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2800.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1677 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HENRY B TIPP**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127664.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-100.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY B TIPP**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : SA17A.127664.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON  
12/10/2015

Amount of Each Receipt this Period

100.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HENRY B TIPP**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

**Transaction ID : SA17A.127665**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1678 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HENRY B TIPPPIE**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

**Transaction ID : SA17A.127665.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY B TIPPPIE**

Mailing Address PO BOX 26557

City	State	Zip Code
AUSTIN	TX	78755

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

**Transaction ID : SA17A.127665.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY TIPPMMANN**

Mailing Address 8027 FLUTTER RD

City	State	Zip Code
FORT WAYNE	IN	46835

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127666**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

250.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1679 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEITH TOBIAS**

Mailing Address PO BOX 666

City  
LA CANADA

State Zip Code  
CA 91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RED PLANE ENTERPRISES, INC

Occupation  
EXEC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.127668**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2015

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK B TOBIN**

Mailing Address 350 TERRELL ROAD

City  
SAN ANTONIO

State Zip Code  
TX 78209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACKMAN WALKER LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127670**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BYRON TODD**

Mailing Address 3955 ROYAL PENNON COURT

City  
NORCROSS

State Zip Code  
GA 30092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127672**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1680 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KAREN TOFT**

Mailing Address 136 SUNSET DR

City	State	Zip Code
PENN HILLS	PA	15235

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127674**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETER R TOLLAISEN**

Mailing Address S612 BIRCHWOOD ROAD

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127676**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GREGORY TOMCZYK**

Mailing Address 8547 KEYSTONE AVE

City	State	Zip Code
SKOKIE	IL	60076

FEC ID number of contributing federal political committee.

C

Name of Employer  
BANK OF MONTREAL

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127678**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1681 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA A TOOHEY**

Mailing Address **313 NEPTINES BIGHT**

City	State	Zip Code
NAPLES	FL	34103

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TOOHEY ENTERPRISES**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127680**

Date of Receipt

**09 / 15 / 2015**

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID TOONEN**

Mailing Address **2600 GOOD SHEPHERD LANE**

City	State	Zip Code
GREEN BAY	WI	54313

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127682**

Date of Receipt

**09 / 11 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN TOPETZES**

Mailing Address **2790 DEAN CIRCLE**

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SANBORN TUBE SALES OF WI.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127684**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1682 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES TORINA**

Mailing Address PO BOX 6237

City	State	Zip Code
PHOENIX	AZ	85005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127686**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RAQUEL TORRES**

Mailing Address 2179 AUGUSTINE DR

City	State	Zip Code
FERNDALE	WA	98248

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127687**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMY TOWNZEN**

Mailing Address 8820 TURNBERRY CT

City	State	Zip Code
FORT WORTH	TX	76179

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127688**

Date of Receipt

**09 / 05 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1683 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SID TRANT**

Mailing Address 4407 CORINTH DR

City	State	Zip Code
MOUNTAIN BRK	AL	35213

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BRADLEY ARANT BOULT CUMMINGS LLP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127690**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAURI H TRAPANI**

Mailing Address 669 MIDDLETON DRIVE

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HUFFINTON DESIGN ASSOCI**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127692**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALLAN C TRASK**

Mailing Address 282 FARMINGTON FALLS RD

City	State	Zip Code
FARMINGTON	ME	04938

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**COCA COLA**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127694**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1684 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOAN TRAYLOR**

Mailing Address **2808 COUNTRY CLUB DR**

City State Zip Code  
**PEARLAND TX 77581**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127696**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DALE TREMBLAY**

Mailing Address **716 E EL PRADO**

City State Zip Code  
**SAN ANTONIO TX 78212**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**C. H. GUENTHER & SON INC**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127698**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BLAIR TREMERE**

Mailing Address **2305 LEE AVE N**

City State Zip Code  
**MINNEAPOLIS MN 55422**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127700**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1500.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1685 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARLA TRENT**

Mailing Address 324 CHESTNUT HILL CT APT 16

City	State	Zip Code
THOUSAND OAKS	CA	91360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127702**

Date of Receipt

**09 / 02 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARLA TRENT**

Mailing Address 324 CHESTNUT HILL CT APT 16

City	State	Zip Code
THOUSAND OAKS	CA	91360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

**Transaction ID : SA17A.127703**

Date of Receipt

**09 / 10 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CARLA TRENT**

Mailing Address 324 CHESTNUT HILL CT APT 16

City	State	Zip Code
THOUSAND OAKS	CA	91360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

**Transaction ID : SA17A.127704**

Date of Receipt

**09 / 14 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1686 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HERB TREU**

Mailing Address 182 S. CLAY RD.

City	State	Zip Code
VAN DYNE	WI	54979

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127706**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PETER TRIOLO**

Mailing Address 118 WOODRIDGE DRIVE

City	State	Zip Code
SAUNDERSTOWN	RI	02874

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127708**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAURA TRIVETTE**

Mailing Address 1825 BARNES MILL ROAD

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIMEDX

Occupation  
HEALTH POLICY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127710**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1687 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROL TROESH**

Mailing Address 1370 JET STREAM DR

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127712**

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL TROESH**

Mailing Address 1370 JET STREAM DR

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127713**

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CAROL TROESH**

Mailing Address 1370 JET STREAM DR

City HENDERSON	State NV	Zip Code 89052
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127714**

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1688 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS TROESH**

Mailing Address **1370 JET STREAM DRIVE**  
**SUITE 100**

City **HENDERSON** State **NV** Zip Code **89052**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**10800.00**

**Transaction ID : SA17A.127716**

Date of Receipt

**07 / 06 / 2015**

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

**10800.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNIS TROESH**

Mailing Address **1370 JET STREAM DRIVE**  
**SUITE 100**

City **HENDERSON** State **NV** Zip Code **89052**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127717**

Date of Receipt

**07 / 06 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-5400.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNIS TROESH**

Mailing Address **1370 JET STREAM DRIVE**  
**SUITE 100**

City **HENDERSON** State **NV** Zip Code **89052**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127718**

Date of Receipt

**07 / 06 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**10800.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1689 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENNIS TROESH**

Mailing Address **1370 JET STREAM DRIVE**  
**SUITE 100**

City **HENDERSON** State **NV** Zip Code **89052**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127719**

Date of Receipt

**07 / 06 / 2015**

**REDESIGNATED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**VALERIE LEE TROYER**

Mailing Address **28465 SW BOBERG ROAD**

City **WILSONVILLE** State **OR** Zip Code **97070**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127721**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACQUELINE TRUDELL**

Mailing Address **1701 E ROBIN WAY**

City **APPLETON** State **WI** Zip Code **54915**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127723**

Date of Receipt

**08 / 11 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1690 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN TRUE**

Mailing Address **61425 GOSNEY RD**

City <b>BEND</b>	State <b>OR</b>	Zip Code <b>97702</b>
---------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.127724**

Date of Receipt

M M / D D / Y Y Y Y
09 / 05 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM TRUKENBROD**

Mailing Address **977 KIRK HILL LN**

City <b>LAKE FOREST</b>	State <b>IL</b>	Zip Code <b>60045</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**260.00**

**Transaction ID : SA17A.127725**

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

**110.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**YVONNE L TSCHUDI**

Mailing Address **1885 SAINT ANDREWS D**

City <b>MORAGA</b>	State <b>CA</b>	Zip Code <b>94556</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127727**

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**460.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1691 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**YVONNE L TSCHUDI**

Mailing Address 1885 SAINT ANDREWS D

City	State	Zip Code
MORAGA	CA	94556

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127728**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**YVONNE L TSCHUDI**

Mailing Address 1885 SAINT ANDREWS D

City	State	Zip Code
MORAGA	CA	94556

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

**Transaction ID : SA17A.127729**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER TUCKER**

Mailing Address 134 HERITAGE CT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KOFAX INC.

Occupation  
NAMED ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127731**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

625.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1692 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER TUCKER**

Mailing Address 134 HERITAGE CT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KOFAX INC.

Occupation  
NAMED ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

**Transaction ID : SA17A.127732**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER TUCKER**

Mailing Address 134 HERITAGE CT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KOFAX INC.

Occupation  
NAMED ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

**Transaction ID : SA17A.127733**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOPHER TUCKER**

Mailing Address 134 HERITAGE CT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KOFAX INC.

Occupation  
NAMED ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

**Transaction ID : SA17A.127734**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1693 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER TUCKER**

Mailing Address 134 HERITAGE CT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KOFAX INC.

Occupation  
NAMED ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

**Transaction ID : SA17A.127735**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER TUCKER**

Mailing Address 134 HERITAGE CT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KOFAX INC.

Occupation  
NAMED ACCOUNT MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127736**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

450.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TRIANGLE CAPITAL

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127738**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

6350.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRIANGLE CAPITAL**

Occupation  
**C.E.O.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127738.0**

Date of Receipt

**06 / 18 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRIANGLE CAPITAL**

Occupation  
**C.E.O.**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127738.1**

Date of Receipt

**06 / 18 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON 12/30/2015**

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRIANGLE CAPITAL**

Occupation  
**C.E.O.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.127739**

Date of Receipt

**07 / 31 / 2015**

**SEE REATTRIBUTION**

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1695 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRIANGLE CAPITAL**

Occupation  
**C.E.O.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127739.0**

Date of Receipt

**07 / 31 / 2015**

**REATTRIBUTION TO GREYSON TUCKER**

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GREYSON TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127739.1**

Date of Receipt

**07 / 31 / 2015**

**REATTRIBUTION FROM GARLAND TUCKER; SEE REDESIGNATION**

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GREYSON TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127739.2**

Date of Receipt

**07 / 31 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1696 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREYSON TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127739.3**

Date of Receipt

**07 / 31 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/30/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TRIANGLE CAPITAL

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13500.00

**Transaction ID : SA17A.127740**

Date of Receipt

**07 / 31 / 2015**

CHARGED BACK

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GARLAND TUCKER**

Mailing Address 2327 LAKE DRIVE

City	State	Zip Code
RALEIGH	NC	27609

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TRIANGLE CAPITAL

Occupation  
C.E.O.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.127741**

Date of Receipt

**07 / 31 / 2015**

CHARGEBACK

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1697 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY TUCKER**

Mailing Address 12765 W 67TH WAY

City	State	Zip Code
ARVADA	CO	80004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BALL CORPORATION**

Occupation  
**PILOT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127742**

Date of Receipt

**07 / 19 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY TUCKER**

Mailing Address 12765 W 67TH WAY

City	State	Zip Code
ARVADA	CO	80004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BALL CORPORATION**

Occupation  
**PILOT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127743**

Date of Receipt

**08 / 19 / 2015**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**REX TUCKER**

Mailing Address PO BOX 51

City	State	Zip Code
VOCA	TX	76887

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**DUTERO**

Occupation  
**MANAGEMENT CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127745**

Date of Receipt

**06 / 21 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1698 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LARRY TUENISSEN**

Mailing Address **W2401 COUNTY ROAD V**

City <b>SHEBOYGAN FAL</b>	State <b>WI</b>	Zip Code <b>53085</b>
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FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127747**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIMOTHY AND NANETTE TULLY**

Mailing Address **47545 CHAPINWOOD RD**

City <b>CABLE</b>	State <b>WI</b>	Zip Code <b>54821</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127749**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANK M TUMAS**

Mailing Address **562 BONDS CREEK RD**

City <b>PENNSBORO</b>	State <b>WV</b>	Zip Code <b>26415</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127751**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1699 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD TURANO**

Mailing Address **1 LOCUST STREET**

City	State	Zip Code
RIVERHEAD	NY	11901

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127753**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAREN TURK**

Mailing Address **4641 INGRAHAM STREET**

City	State	Zip Code
SAN DIEGO	CA	92109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1922.40**

**Transaction ID : SA17A.127754**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

IN-KIND: CATERING SERVICES

Amount of Each Receipt this Period

**1922.40**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MICHAEL TURK**

Mailing Address **4641 INGREHAM STREET**

City	State	Zip Code
SAN DIEGO	CA	92109

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KD DEVELOPMENT

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127756**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5622.40**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1700 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127758**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127759**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128725**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1701 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128726**

Date of Receipt

**08 / 19 / 2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6900.00

**Transaction ID : SA17A.127760**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127761**

Date of Receipt

**09 / 03 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-1500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1702 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JACK E TURNER**

Mailing Address 2326 SW 122ND ST

City	State	Zip Code
OKLAHOMA CITY	OK	73170

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6900.00

**Transaction ID : SA17A.127762**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

REDESIGNATED

Amount of Each Receipt this Period

1500.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARGARET TURNER**

Mailing Address 175 OCEAN AVE.

City	State	Zip Code
BREEZY POINT	NY	11697

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HEARTSHAREST.VINCENT'SSERVICES

Occupation  
MEDICAL CASE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127764**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARGARET TURNER**

Mailing Address 175 OCEAN AVE.

City	State	Zip Code
BREEZY POINT	NY	11697

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HEARTSHAREST.VINCENT'SSERVICES

Occupation  
MEDICAL CASE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

**Transaction ID : SA17A.127765**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

650.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1703 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET TURNER**

Mailing Address 175 OCEAN AVE.

City	State	Zip Code
BREEZY POINT	NY	11697

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HEARTSHAREST.VINCENT'SSERVICES

Occupation  
MEDICAL CASE MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

**Transaction ID : SA17A.127766**

Date of Receipt

**08 / 01 / 2015**

Amount of Each Receipt this Period

650.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL S TURNER**

Mailing Address 5556 NAKOMA DRIVE

City	State	Zip Code
DALLAS	TX	75209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127768**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MIN TURNER**

Mailing Address 820 SHALLOWFORD ROAD

City	State	Zip Code
KENNSAW	GA	30144

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
IPT SINK COMPANY

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127770**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1704 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**PHYLLIS D TURNER**

Mailing Address 175 VILLA LN.

City	State	Zip Code
TERRE HAUTE	IN	47802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127772**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DALE TURNIDGE**

Mailing Address PO BOX 3820

City	State	Zip Code
SALEM	OR	97302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127774**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER TUTTLE**

Mailing Address 6419 13TH STREET

City	State	Zip Code
ALEXANDRIA	VA	22307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
COUNCIL ON FOREIGN RELATIONS

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127776**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3200.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1705 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PAUL V TUTTLE**

Mailing Address 5210 BLACKSTOCK RD

City	State	Zip Code
SHEBOYGAN	WI	53083

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AURORA SHEBOYGA

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127778**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NEIL TWILLA**

Mailing Address PO BOX 10964

City	State	Zip Code
MURFREESBORO	TN	37129

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127780**

Date of Receipt

**07 / 27 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID TWYVER**

Mailing Address 949 NW OVERTON ST - UNIT 312

City	State	Zip Code
PORTLAND	OR	97209

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127782**

Date of Receipt

**06 / 19 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1706 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAMM TYLER**

Mailing Address 6010 BREMO RD

City	State	Zip Code
RICHMOND	VA	23226

FEC ID number of contributing federal political committee.

C

Name of Employer  
SWI

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-1.00

**Transaction ID : SA17A.105857**

Date of Receipt

MM / DD / YYYY  
06 / 19 / 2015

Amount of Each Receipt this Period

1.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAMM TYLER**

Mailing Address 6010 BREMO RD

City	State	Zip Code
RICHMOND	VA	23226

FEC ID number of contributing federal political committee.

C

Name of Employer  
SWI

Occupation  
DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-1.00

**Transaction ID : SA17A.105903**

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2015

Amount of Each Receipt this Period

-1.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.127784**

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1707 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.127785**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127785.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-300.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.127785.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

300.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1708 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

**Transaction ID : SA17A.127786**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

SEE REDESIGNATION

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

**Transaction ID : SA17A.127786.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES R TYLER**

Mailing Address 2409 CHESTNUT ST APT 16

City	State	Zip Code
ATLANTIC	IA	50022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

**Transaction ID : SA17A.127786.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

500.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1709 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREG UHEN**

Mailing Address 2775 W. BRADLEY RD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EPPSTEIN UHEN ARCHITECTS

Occupation  
ARCHITECT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127788**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ELIZABET A UIHLEIN**

Mailing Address 1396 N WAUKEGAN ROAD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ULINE, INC.

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127790**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZABET A UIHLEIN**

Mailing Address 1396 N WAUKEGAN ROAD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ULINE, INC.

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127791**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1710 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELIZABET A UIHLEIN**

Mailing Address 1396 N WAUKEGAN ROAD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ULINE, INC.

Occupation  
OWNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127792**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LUCIA UIHLEIN**

Mailing Address 715 LANDS END DR

City	State	Zip Code
LONGBOAT KEY	FL	34228

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.127794**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD E UIHLEIN**

Mailing Address 1396 N WAUKEGAN ROAD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ULINE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127796**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

7400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1711 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD E UIHLEIN**

Mailing Address 1396 N WAUKEGAN ROAD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ULINE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127797**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD E UIHLEIN**

Mailing Address 1396 N WAUKEGAN ROAD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ULINE

Occupation  
OWNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127798**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICH ULLSMITH**

Mailing Address P.O. BOX 1222

City	State	Zip Code
FERNDAL	WA	98248

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127800**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1712 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY ULRICH**

Mailing Address **3766 ALEXANDRIA COURT**

City	State	Zip Code
WOODBURY	MN	55129

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.127802**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

REATTRIBUTED

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATHALIE A ULRICH**

Mailing Address **3766 ALEXANDRIA COURT**

City	State	Zip Code
WOODBURY	MN	55129

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.127804**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATHALIE A ULRICH**

Mailing Address **3766 ALEXANDRIA COURT**

City	State	Zip Code
WOODBURY	MN	55129

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.127805**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2500.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1713 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT J ULRICH**

Mailing Address **5400 LONDONDERRY ROAD**

City	State	Zip Code
EDINA	MN	55436

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127807**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS ULRICH**

Mailing Address **4420 HAMPSHIRE HILL**

City	State	Zip Code
WATERFORD	WI	53185

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127809**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		21		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MATTHEW UMENTUM**

Mailing Address **1150 GLORY ROAD**

City	State	Zip Code
GREEN BAY	WI	54304

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ROL-TEC, INC.**

Occupation  
**PREESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127811**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1714 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MATTHEW M UMENTUM**

Mailing Address 1660 HAWTHORNE HEIGHTS

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127813**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**M. URLAKIS**

Mailing Address PO BOX 408

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127815**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDWIN USELMANN**

Mailing Address 35601 NE 251ST AVE

City	State	Zip Code
YACOLT	WA	98675

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127817**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1715 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL UTECH**

Mailing Address 10355 SPRINGPOINTE CIR APT D

City	State	Zip Code
MIAMISBURG	OH	45342

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ROMACK STAFFING**

Occupation  
**SECURITY ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.127818**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	5

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS VAHIMBERGEN**

Mailing Address 8023 W KENSINGTON DRIVE

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127820**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DENNIS H VANDENBERG**

Mailing Address 1215 N HICKORY FARM

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**VALLEY CORVETTE**

Occupation  
**BUSINESS OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127822**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1716 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES VANDERHIDER**

Mailing Address 302 W COWAN DR

City	State	Zip Code
HOUSTON	TX	77007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENER VEST LTD**

Occupation  
**CFO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127824**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES VANDERHIDER**

Mailing Address 302 W COWAN DR

City	State	Zip Code
HOUSTON	TX	77007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ENER VEST LTD**

Occupation  
**CFO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127824.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LYNNE VANDERHIDER**

Mailing Address 302 W COWAN DR

City	State	Zip Code
HOUSTON	TX	77007

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127824.1**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1717 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DON VANDERVELDE**

Mailing Address 5409 HUNTWICK DR NW

City	State	Zip Code
GIG HARBOR	WA	98335

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127826**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DON VANDERVELDE**

Mailing Address 5409 HUNTWICK DRIVE NW

City	State	Zip Code
GIG HARBOR	WA	98335

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.127828**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**J STEPHE VANDERWOUD**

Mailing Address 510 MEADOWMONT VILLA  
3

City	State	Zip Code
CHAPEL HILL	NC	27517

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127830**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1718 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOEY J VAN DINTER**

Mailing Address **PO BOX 754**

City State Zip Code  
**WISCONSIN DEL WI 53965**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VAN DINTER INSURANCE**

Occupation  
**INSURANCE AGENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127832**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MARK VANDOREN**

Mailing Address **5453 CARDENO DR**

City State Zip Code  
**LA JOLLA CA 92037**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALLSTARGLASS**

Occupation  
**VP OPERATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127834**

Date of Receipt

**07 / 28 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GENE VAN DYKE**

Mailing Address **11 GREENWAY PLAZA SUITE**

City State Zip Code  
**HOUSTON TX 77046**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127836**

Date of Receipt

**09 / 02 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1750.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1719 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KENNETH VANDYKE**

Mailing Address 57 COACHMAN DR

City	State	Zip Code
RISING SUN	MD	21911

FEC ID number of contributing federal political committee.

C

Name of Employer  
VANDYKE INSURANCE

Occupation  
INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127838**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**AUDREY VAN ESS**

Mailing Address W6683 E SHORELAND ROAD

City	State	Zip Code
ELKHART LAKE	WI	53020

FEC ID number of contributing federal political committee.

C

Name of Employer  
SALES MARKETING GROUP WI LLC

Occupation  
OWNER CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127840**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHOJ (CHARLES) VANG**

Mailing Address 4340 N 133RD STREET

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer  
CHARLES V. VANG INS. AGENCY

Occupation  
AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127842**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1720 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TAMERA VARGASON**

Mailing Address **PO BOX 1598**

City **THAYNE** State **WY** Zip Code **83127**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127844**

Date of Receipt

**06 / 25 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID VARNAM**

Mailing Address **705 E. ELM ST**

City **LANCASTER** State **WI** Zip Code **53813**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CITY OF LANCASTER**

Occupation  
**ALDERMAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127846**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JAMES VARNELL**

Mailing Address **112 MILL PARK CHASE**

City **WOODSTOCK** State **GA** Zip Code **30188**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JAMES H VARNELL, INC**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127848**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1721 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R. VASKO**

Mailing Address 19411 NE 43RD PL.

City	State	Zip Code
SAMMAMISH	WA	98074-6135

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127850**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD VASSELL**

Mailing Address 188 KINGS HWY.

City	State	Zip Code
MOUNT ROYAL	NJ	08061

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MCGUIRE INC

Occupation  
METAL FABRICATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127852**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SRIDHAR VASUDEVAN**

Mailing Address 5200 UPPER LAKEVIEW RID

City	State	Zip Code
BELGIUM	WI	53004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127854**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1722 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**THERESE H VAUGHN**

Mailing Address 2010 WOODHAVEN LN

City	State	Zip Code
DULUTH	MN	55803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226.00

**Transaction ID : SA17A.127855**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

113.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THERESE H VAUGHN**

Mailing Address 2010 WOODHAVEN LN

City	State	Zip Code
DULUTH	MN	55803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

341.00

**Transaction ID : SA17A.127856**

Date of Receipt

**09 / 28 / 2015**

Amount of Each Receipt this Period

115.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GEORGE VAUGHT**

Mailing Address PO BOX 13557

City	State	Zip Code
DENVER	CO	80201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127858**

Date of Receipt

**08 / 03 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

728.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1723 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KYLE VAUGHT**

Mailing Address 5452 SIERRA ROJA RD

City	State	Zip Code
IRVINE	CA	92603

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127859**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DANIEL VEENHUIS**

Mailing Address N833 WAUBUNSEE TRAIL

City	State	Zip Code
FORT ATKINSON	WI	53538

FEC ID number of contributing federal political committee.

C

Name of Employer  
EPIC RESINS, INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127861**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KATHY E VEGHTE**

Mailing Address 2459 JONQUIL COURT

City	State	Zip Code
LAFAYETTE	CO	80026

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

**Transaction ID : SA17A.107144**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-25.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1724 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICK VEGHTE**

Mailing Address **2459 JONQUIL COURT**

City State Zip Code  
**LAFAYETTE CO 80026**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KATHREIN USA**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**25.00**

**Transaction ID : SA17A.107146**

Date of Receipt

**08 / 18 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**25.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID VEILE**

Mailing Address **PO BOX 349**

City State Zip Code  
**WORLAND WY 82401**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**VEILE MORTUARY**

Occupation  
**FUNERAL DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.127863**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JONATHAN VENERLOH**

Mailing Address **67 MARYMONT AVENUE**

City State Zip Code  
**ATHERTON CA 94027**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GOOGLE INC.**

Occupation  
**SALES DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127865**

Date of Receipt

**07 / 12 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3200.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1725 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DON A VERNON**

Mailing Address 1448 SANTA LUISA DR

City	State	Zip Code
SOLANA BEACH	CA	92075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127866**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2015			

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN VEURINK**

Mailing Address 1621 TUCKAWAY TRL

City	State	Zip Code
WEST CHESTER	PA	19380

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NISOURCE CORP. SERVICE

Occupation  
CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127868**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			27			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**L THOMAS VIA**

Mailing Address 8453 FRIARLYNCH LN

City	State	Zip Code
GERMANTOWN	TN	38139

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127870**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			26			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1726 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL VICARELLI**

Mailing Address 13 COLUMBUS PLACE

City	State	Zip Code
CLIFFSIDE PARK	NJ	07010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CINE MAGIC EAST RIVER STUDIOS

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127872**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 29 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DIANE VICARS**

Mailing Address 2406 GRANT ST

City	State	Zip Code
BERKELEY	CA	94703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127873**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 22 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NOBUKO VICARS**

Mailing Address 2406 GRANT ST

City	State	Zip Code
BERKELEY	CA	94703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127874**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1727 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES A VICE**

Mailing Address 2769 HORSESHOE KNOLL

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

C

Name of Employer  
INTERCONTINENTAL EXCHANGE

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127876**

Date of Receipt

MM / DD / YYYY  
08 / 07 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY C VICKERS**

Mailing Address 22990 N US HIGHWAY 8

City	State	Zip Code
NEWCASTLE	WY	82701

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127877**

Date of Receipt

MM / DD / YYYY  
09 / 09 / 2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAY M VILLA**

Mailing Address 318 BOSWORTH LN

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127879**

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1728 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS VINE**

Mailing Address **14668 TIMBER POINT**

City	State	Zip Code
ALPHARETTA	GA	30004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MIMEDX**

Occupation  
**ENGINEER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127881**

Date of Receipt

**07 / 20 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM VINEY**

Mailing Address **25723 MEADOWHOUSE CT**

City	State	Zip Code
SOUTH RIDING	VA	20152

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PRINCIPAL**

Occupation  
**BGR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.127883**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EVAN VINSON**

Mailing Address **1488 EDGEWOOD LANE**

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MITCHELL ASSOCIATES**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127885**

Date of Receipt

**06 / 30 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**7150.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1729 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EVAN VINSON**

Mailing Address **1488 EDGEWOOD LANE**

City <b>WINNETKA</b>	State <b>IL</b>	Zip Code <b>60093</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MITCHELL ASSOCIATES**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128750**

Date of Receipt

**06 / 30 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHANNON VINSON**

Mailing Address **1488 EDGEWOOD LANE**

City <b>WINNETKA</b>	State <b>IL</b>	Zip Code <b>60093</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128752**

Date of Receipt

**06 / 30 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JEFF VISTA**

Mailing Address **123 MALTLAND DR**

City <b>CARY</b>	State <b>NC</b>	Zip Code <b>27518</b>
---------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DUKE UNIVERSITY**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127887**

Date of Receipt

**07 / 24 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**250.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1730 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT J VLASIC**

Mailing Address 38710 WOODWARD AVE

City	State	Zip Code
BLOOMFIELD HI	MI	48304

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127889**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LOIS VODACEK**

Mailing Address 500 N LENZNER AVE

City	State	Zip Code
SIERRA VISTA	AZ	85635

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.127891**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PAUL W VOEGELI**

Mailing Address P.O. BOX 56

City	State	Zip Code
MONROE	WI	53566

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127893**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1220.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1731 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SARA VOELZ**

Mailing Address 23217 W 135TH STREET

City	State	Zip Code
PLAINFIELD	IL	60544

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TESKA ASSOCIATES, INC

Occupation  
PRINCIPAL FINANCIAL OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

**Transaction ID : SA17A.127895**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

230.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SARA VOELZ**

Mailing Address 23217 W 135TH STREET

City	State	Zip Code
PLAINFIELD	IL	60544

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TESKA ASSOCIATES, INC

Occupation  
PRINCIPAL FINANCIAL OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

**Transaction ID : SA17A.127896**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2015			

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK C VOIGHT**

Mailing Address 2508 N RICHMOND ST

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
VOIGHT INSURANCE AGENCY

Occupation  
INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127898**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			23			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

580.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1732 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID VOIGTSBERG**

Mailing Address 11360 SW RESTON CT

City	State	Zip Code
PORT ST LUCIE	FL	34987

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127900**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID VOIGTSBERG**

Mailing Address 11360 SW RESTON CT

City	State	Zip Code
PORT ST LUCIE	FL	34987

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127901**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID VOIGTSBERG**

Mailing Address 11360 SW RESTON CT

City	State	Zip Code
PORT ST LUCIE	FL	34987

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.127902**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1733 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL A. VOIGTSBERGER**

Mailing Address 201 LAKESHORE DRIVE

City	State	Zip Code
CHEYENNE	WY	82009

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127903**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROLYN VOLLRATH**

Mailing Address 10413 FOX BOROUGH CT.

City	State	Zip Code
OAKDALE	CA	95361

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127905**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS VONDERAHE**

Mailing Address 11 E INTERWOOD PL

City	State	Zip Code
CINCINNATI	OH	45220

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.127907**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

Amount of Each Receipt this Period

225.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

625.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1734 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GEORGE A VONDERLIND**

Mailing Address PO BOX 298

City	State	Zip Code
EDWARDS	CO	81632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127909**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 04 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JANET B VON WODTKE**

Mailing Address 1931 MAIN ST

City	State	Zip Code
GLASTONBURY	CT	06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127911**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRANCIS VOORWOLD**

Mailing Address 307 RENAU BLVD.

City	State	Zip Code
SUMMERVILLE	SC	29483

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127913**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 20 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1400.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1735 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES VOSS**

Mailing Address 7131 N. RIDGEWAY AVE.

City	State	Zip Code
LINCOLNWOOD	IL	60712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
JVI, INC.

Occupation  
SALES/MARKETING/MANUFACTURING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17A.127915**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JAMES VOSS**

Mailing Address 7131 N. RIDGEWAY AVE.

City	State	Zip Code
LINCOLNWOOD	IL	60712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
JVI, INC.

Occupation  
SALES/MARKETING/MANUFACTURING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128827**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LINDA VOSS**

Mailing Address 7131 N. RIDGEWAY AVE.

City	State	Zip Code
LINCOLNWOOD	IL	60712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

**Transaction ID : SA17A.128829**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

REATTRIBUTED

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

5000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1736 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M VOSTERS**

Mailing Address **W1811 GOLDEN GLOW RD**

City <b>FREEDOM</b>	State <b>WI</b>	Zip Code <b>54130</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILKSOURCE**

Occupation  
**DAIRY PRODUCER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.127917**

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN M VOSTERS**

Mailing Address **W1811 GOLDEN GLOW RD**

City <b>FREEDOM</b>	State <b>WI</b>	Zip Code <b>54130</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILKSOURCE**

Occupation  
**DAIRY PRODUCER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127918**

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KERI L VOSTERS**

Mailing Address **W1811 GOLDEN GLOW RD**

City <b>FREEDOM</b>	State <b>WI</b>	Zip Code <b>54130</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MILKSOURCE, INC**

Occupation  
**DAIRY FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127920**

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**5400.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1737 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY VOYLES**

Mailing Address 2926 HIGHWAY 75

City	State	Zip Code
PARKIN	AR	72373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127922**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BOYD WACH**

Mailing Address 3906 CHASEWOOD DR.

City	State	Zip Code
CRESTWOOD	KY	40014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127923**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2015			

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD WACKER**

Mailing Address 119 MAONO PLACE

City	State	Zip Code
HONOLULU	HI	96821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN SAVINGS BANK

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127925**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			26			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

900.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1738 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SCOTT WALKER INC**

Occupation  
**CO COUNSEL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127927**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SCOTT WALKER INC**

Occupation  
**CO COUNSEL**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2869.00

**Transaction ID : SA17A.129153**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

REFUND PENDING

Amount of Each Receipt this Period

169.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SCOTT WALKER INC**

Occupation  
**CO COUNSEL**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2870.00

**Transaction ID : SA17A.129165**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

REFUND PENDING

Amount of Each Receipt this Period

1.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2870.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1739 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN E. WADE**

Mailing Address 222 SILVERADO DR

City	State	Zip Code
NAPLES	FL	34119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127929**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM WADE**

Mailing Address PO BOX 191

City	State	Zip Code
GREENWICH	NY	12834

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127931**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**YASH P WADHWA**

Mailing Address 920 W BRENTWOOD LN

City	State	Zip Code
GLENDALE	WI	53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
STRAND ASSOCIATES, INC

Occupation  
DIRECTOR OF OPERATIONS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127933**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1740 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**YASH P WADHWA**

Mailing Address 920 W BRENTWOOD LN

City	State	Zip Code
GLENDALE	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STRAND ASSOCIATES, INC**

Occupation  
**DIRECTOR OF OPERATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.127934**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN B WAGNER**

Mailing Address 1899 COTTONTAIL DR

City	State	Zip Code
OSHKOSH	WI	54904

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127936**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD WAGNER**

Mailing Address 5531 HIGHWAY 38

City	State	Zip Code
FRANKSVILLE	WI	53126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127938**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1741 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERTA WAGNER**

Mailing Address PO BOX 307

City State Zip Code  
LYONS WI 53148

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127940**

Date of Receipt

M M / D D / Y Y Y Y  
07 20 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROSEMARY WAGNER**

Mailing Address W3445 CRESTWOOD DR

City State Zip Code  
WHITEWATER WI 53190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.127942**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**URSULA WAGSTAFF**

Mailing Address 9365 NAPLES STREET

City State Zip Code  
SAN DIEGO CA 92121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA BOTANA INTERN

Occupation  
PRESIDENT WORLDWIDE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127944**

Date of Receipt

M M / D D / Y Y Y Y  
07 27 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2203.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1742 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ANDREW D WAHL**

Mailing Address 1130 TOURNAMENT DR

City	State	Zip Code
HILLSBOROUGH	CA	94010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**IG PARTNERS INC.**

Occupation  
**MANAGING DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.127946**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**F WAITE**

Mailing Address 203 CORAL AVE

City	State	Zip Code
NEWPORT BEACH	CA	92662

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127948**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**F WAITE**

Mailing Address 203 CORAL AVE

City	State	Zip Code
NEWPORT BEACH	CA	92662

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127949**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1743 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AUDREY WALBY**

Mailing Address 1440 LONE OAK LANE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BUYSEASONS**

Occupation  
**DIRECTOR OF ANALYTICS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127951**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS WALDERA**

Mailing Address W20985 COUNTY ROAD Q

City	State	Zip Code
WHITEHALL	WI	54773

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127953**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER WALDIE**

Mailing Address 4105 STANHOPE ST

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127954**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

850.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1744 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK WALDMAN**

Mailing Address 501 CHURCH STREET NE STE 110

City	State	Zip Code
VIENNA	VA	22180

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTMENT ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127955**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HOWARD WALDOW**

Mailing Address 11963 CREST

City	State	Zip Code
BEVERLY HILLS	CA	90210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
RE INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127957**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES WALKER**

Mailing Address 770 TECHNOLOGY WAY

City	State	Zip Code
CHIPPEWA FALLS	WI	54729

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CCEDC

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127959**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1745 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DALE A WALKER**

Mailing Address 450 LAURY LANE

City	State	Zip Code
NEW WILMINGTO	PA	16142

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.127961**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DALE A WALKER**

Mailing Address 450 LAURY LANE

City	State	Zip Code
NEW WILMINGTO	PA	16142

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127962**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID WALKER**

Mailing Address 37 BEACON STREET

City	State	Zip Code
BRIDGEPORT	CT	06605

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PRICEWATERHOUSECOOPERS

Occupation  
SENIOR STRATEGIC ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127964**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1746 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN WALKER**

Mailing Address **7 PINE GROVE CIR**

City

**HOUSTON**

State

**TX**

Zip Code

**77024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**ENERVEST LTD**

Occupation

**CEO**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127966**

Date of Receipt

**07**

**13**

**2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHNNY WALKER**

Mailing Address **18803 EL BELLO PASEO**

City

**MONROE**

State

**WA**

Zip Code

**98272**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**RETIRED**

Occupation

**RETIRED**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.127967**

Date of Receipt

**07**

**31**

**2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUD WALKER**

Mailing Address **446 FAUST LANE**

City

**HOUSTON**

State

**TX**

Zip Code

**77024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**ENERVEST, LTD**

Occupation

**EVP & COO**

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127969**

Date of Receipt

**07**

**13**

**2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1747 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LISA A WALKER**

Mailing Address **7 PINE GROVE CIRCLE**

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127971**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT H WALKER**

Mailing Address **411 FOREST ST**

City	State	Zip Code
LEWISBURG	TN	37091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.127973**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZABET WALL**

Mailing Address **6565 S NORTHSORE DR**

City	State	Zip Code
KNOXVILLE	TN	37919

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127975**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1748 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRENCE WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TWALL PROPERTIES**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.127977**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

SEE REATTRIBUTION & REDESIGNATION

Amount of Each Receipt this Period

10800.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TERRENCE WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TWALL PROPERTIES**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127977.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

REATTRIBUTION TO HELEN WALL

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HELEN WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127977.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

REATTRIBUTION FROM TERRENCE WALL; SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1749 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HELEN WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127977.2**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HELEN WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127977.3**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TERRENCE WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
TWALL PROPERTIES

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127977.4**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1750 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TERRENCE WALL**

Mailing Address PO BOX 620037

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TWALL PROPERTIES**

Occupation  
**CEO**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.127977.5**

Date of Receipt

**09 / 29 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON  
11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHANNON WALLACE**

Mailing Address 3011 GOLF CREST LANE

City	State	Zip Code
WOODSTOCK	GA	30189

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.127979**

Date of Receipt

**07 / 17 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIMOTHY WALLACE**

Mailing Address 17010 SANCTUARY TRAIL

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GLP**

Occupation  
**ASSOCIATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127981**

Date of Receipt

**07 / 11 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1751 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JULIE WALLEN**

Mailing Address **16550 PRAIRIE COURT**

City State Zip Code  
**BROOKFIELD WI 53005**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128838**

Date of Receipt

**07 / 09 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**500.00**

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TIMOTHY WALLEN**

Mailing Address **16550 PRAIRIE COURT**

City State Zip Code  
**BROOKFIELD WI 53005**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MLG**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.127983**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TIMOTHY WALLEN**

Mailing Address **16550 PRAIRIE COURT**

City State Zip Code  
**BROOKFIELD WI 53005**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MLG**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128836**

Date of Receipt

**07 / 09 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-500.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1000.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1752 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CATHY WALLER**

Mailing Address **W227S4180 CONCORD COURT**

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
REPUBLICAN PARTY OF WAUKESHA COUNTY	EXECUTIVE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127985**

Date of Receipt

**07** / **01** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CATHY WALLER**

Mailing Address **W227S4180 CONCORD COURT**

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation
REPUBLICAN PARTY OF WAUKESHA COUNTY	EXECUTIVE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

125.00

**Transaction ID : SA17A.128680**

Date of Receipt

**07** / **01** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-125.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STEVE WALLER**

Mailing Address **W227S4180 CONCORD COURT**

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer	Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

125.00

**Transaction ID : SA17A.128682**

Date of Receipt

**07** / **01** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

125.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

250.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1753 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES E WALLING**

Mailing Address 104 W N WOODY RD

City	State	Zip Code
AZLE	TX	76020

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.127987**

Date of Receipt

MM / DD / YYYY  
08 / 11 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DALE WALLS**

Mailing Address 1016 VALLEY VIEW DR.

City	State	Zip Code
BLOOMFIELD	NM	87413-1495

FEC ID number of contributing federal political committee.

C

Name of Employer  
TWIN STARS LTD.

Occupation  
MECHANIC

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127988**

Date of Receipt

MM / DD / YYYY  
08 / 06 / 2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOEL WALLSKOG**

Mailing Address 12907 N. HIGHGATE COURT

City	State	Zip Code
MEQUON	WI	53097

FEC ID number of contributing federal political committee.

C

Name of Employer  
AAH

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.127990**

Date of Receipt

MM / DD / YYYY  
07 / 07 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1754 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDWIN F WALMER**

Mailing Address **189 MONTEREY DR**

City <b>NAPLES</b>	State <b>FL</b>	Zip Code <b>34119</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.127991**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**THOMAS WALRATH**

Mailing Address **1471 THOMAS LANE**

City <b>EAGAR</b>	State <b>MN</b>	Zip Code <b>55122</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THOMAS REUTERS**

Occupation  
**FACILITY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5000.00**

**Transaction ID : SA17A.127993**

Date of Receipt

M M / D D / Y Y Y Y
08 / 19 / 2015

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS WALRATH**

Mailing Address **1471 THOMAS LANE**

City <b>EAGAR</b>	State <b>MN</b>	Zip Code <b>55122</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THOMAS REUTERS**

Occupation  
**FACILITY MANAGEMENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.127993.0**

Date of Receipt

M M / D D / Y Y Y Y
08 / 19 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2500.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5200.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1755 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAWN WALRATH**

Mailing Address **1471 THOMAS LANE**

City **EAGAR** State **MN** Zip Code **55122**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JOE'S SPORTING GOODS**

Occupation  
**SALES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.127993.1**

Date of Receipt

**08 / 19 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

**2500.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DAVID J WALSH**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127995**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK J WALSH**

Mailing Address **53 W JACKSON BLVD**

City **CHICAGO** State **IL** Zip Code **60604**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MARK J WALSH & CO.**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.127997**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1756 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT WALSTAD**

Mailing Address PO BOX 205

City

CASCADE

State

CO

Zip Code

80809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.127999**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 06 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL WALTER**

Mailing Address 424 CLEVELAND ST, APT 205

City

WINNECONNE

State

WI

Zip Code

54986

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128001**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HELEN WAMPLER**

Mailing Address 253 LITTLE STATION ROAD

City

HOLLAND

State

HI

Zip Code

49424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128003**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 22 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1757 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RUSSELL WANKE**

Mailing Address **711 E TALGRASS DR**

City <b>APPLETON</b>	State <b>WI</b>	Zip Code <b>54913</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EXPERA**

Occupation  
**MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128005**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN W WARD**

Mailing Address **1 BLACKBERRY RD**

City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37215</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128007**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHENI J WARD**

Mailing Address **1576 BROKEN ARROW RD**

City <b>GARDNERVILLE</b>	State <b>NV</b>	Zip Code <b>89410</b>
-----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.128009**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**300.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1758 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUMIE WARD**

Mailing Address **P.O. BOX 78**

City <b>PENRYN</b>	State <b>CA</b>	Zip Code <b>95663</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INSTRUCTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128011**

Date of Receipt

M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DENNETT WARE**

Mailing Address **317 LIMESTONE CREEK ROAD**

City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78232</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**N/A**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128013**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZABETH WAREING**

Mailing Address **3511 DEL MONTE**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77019</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**N/A**

Occupation  
**HOUSEWIFE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.128015**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4500.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1759 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD J WAREZAK**

Mailing Address 3649 WOLF RD

City	State	Zip Code
SAGINAW	MI	48601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MICHIGAN TRUCK SPRING OF SAGINAW

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128017**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KATHY WARNE**

Mailing Address 1004 MERIDIAN RD

City	State	Zip Code
EAGLE POINT	OR	97524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RANCHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128019**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128021**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1760 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

**Transaction ID : SA17A.128022**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Receipt this Period

800.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

**Transaction ID : SA17A.128023**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

**Transaction ID : SA17A.128024**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1150.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1761 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2150.00

**Transaction ID : SA17A.128025**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

**Transaction ID : SA17A.128026**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2350.00

**Transaction ID : SA17A.128027**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1762 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2450.00

**Transaction ID : SA17A.128028**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		16		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3450.00

**Transaction ID : SA17A.128029**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128029.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-750.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1763 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3450.00

**Transaction ID : SA17A.128029.1**

Date of Receipt

**08 / 23 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

750.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

**Transaction ID : SA17A.128030**

Date of Receipt

**08 / 25 / 2015**

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3750.00

**Transaction ID : SA17A.128031**

Date of Receipt

**08 / 29 / 2015**

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

300.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1764 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

**Transaction ID : SA17A.128032**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 02 / 2015

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4750.00

**Transaction ID : SA17A.128033**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4850.00

**Transaction ID : SA17A.128034**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2015

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1765 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WARNICK**

Mailing Address 192 PRITCHARD DR

City	State	Zip Code
PALM COAST	FL	32164

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4900.00

**Transaction ID : SA17A.128035**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

REFUNDED ON 11/30/2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALD WARNOCK**

Mailing Address 6095 SW OLD SCHOLLS FERRY RD

City	State	Zip Code
PORTLAND	OR	97223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EPIC IMAGING CENTER

Occupation  
RADIOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128037**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MIKE WARREN**

Mailing Address 59860 LASALLE RD

City	State	Zip Code
MONTROSE	CO	81403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128039**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1766 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA WARREN**

Mailing Address 6373 W 78TH ST

City	State	Zip Code
LOS ANGELES	CA	90045

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.128040**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN WARTA**

Mailing Address PO BOX 1088

City	State	Zip Code
CAMAS	WA	98607

FEC ID number of contributing federal political committee.

C

Name of Employer  
CASCADE DIVIDE

Occupation  
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128042**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RODERICK S WASHINGTON**

Mailing Address 9417 ENGEL LN

City	State	Zip Code
OLIVETTE	MO	63132

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128044**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1767 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AMIR WASILLULLAH**

Mailing Address 101 PLAZA REAL SOUTH, APT 828

City	State	Zip Code
BOCA RATON	FL	33432

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
3 DM INVESTMENTS LLC

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128719**

Date of Receipt

**07 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEN WASILLULLAH**

Mailing Address 101 PLAZA REAL SOUTH, APT 828

City	State	Zip Code
BOCA RATON	FL	33432

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128721**

Date of Receipt

**07 / 10 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMIR WASIULLAH**

Mailing Address 101 PLAZA REAL SOUTH, APT 828

City	State	Zip Code
BOCA RATON	FL	33432

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
3 DM INVESTMENTS LLC

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128046**

Date of Receipt

**07 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1768 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KARIN WASIULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128875**

Date of Receipt

**08** / **09** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MASOOD WASIULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AURORA HEALTHCARE

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128048**

Date of Receipt

**08** / **04** / **2015**

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MASOOD WASIULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AURORA HEALTHCARE

Occupation  
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.128049**

Date of Receipt

**08** / **04** / **2015**

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1769 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MASOOD WASIUULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AURORA HEALTHCARE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128050**

Date of Receipt

**08 / 04 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MASOOD WASIUULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AURORA HEALTHCARE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128051**

Date of Receipt

**08 / 09 / 2015**

**SEE REATTRIBUTION & REDESIGNATION**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MASOOD WASIUULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AURORA HEALTHCARE**

Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128052**

Date of Receipt

**08 / 09 / 2015**

**CHARGEBACK**

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

-5400.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1770 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MASOOD WASIUULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128871**

Date of Receipt

**08** / **09** / **2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MASOOD WASIUULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128872**

Date of Receipt

**08** / **09** / **2015**

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MASOOD WASIUULLAH**

Mailing Address 9255 N. UPPER RIVER ROAD

City	State	Zip Code
RIVER HILLS	WI	53217

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

-2700.00

**Transaction ID : SA17A.128873**

Date of Receipt

**08** / **09** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1771 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AARON WATERMAN**

Mailing Address **E10445 XANADU ROAD**

City <b>WISCONSIN DELLS</b>	State <b>WI</b>	Zip Code <b>53965</b>
--------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128054**

Date of Receipt

M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ANDREW W WATERMAN**

Mailing Address **441 ALCAN DRIVE**

City <b>BARABOO</b>	State <b>WI</b>	Zip Code <b>53913</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**HOTEL/RESTAURANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128056**

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ANDREW WATERMAN**

Mailing Address **1142 PAPER FIG COURT**

City <b>SANIBEL</b>	State <b>FL</b>	Zip Code <b>33957</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**HOTEL/RESTAURANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128058**

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

REATTRIBUTED

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1772 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CONNIE WATERMAN**

Mailing Address 15 CHESTNUT AVE

City	State	Zip Code
NARBERTH	PA	19072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACYS

Occupation  
RETAIL WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

**Transaction ID : SA17A.128059**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CORY WATERMAN**

Mailing Address S897 CLARA AVENUE

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128061**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JACK WATERMAN**

Mailing Address 1011 WEBER AVENUE

City	State	Zip Code
WISCONSIN DEL	WI	53965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MOOSEJAW PIZZA BREWING CO

Occupation  
CO OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128063**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 12 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3900.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1773 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN V WATERMAN**

Mailing Address **1360 MAMEROW LANE EAST**

City <b>OCONOMOWOC</b>	State <b>WI</b>	Zip Code <b>53066</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GREAT WOLF RESORTS**

Occupation  
**CONSTRUCTION MANAGER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128065**

Date of Receipt

**08 / 14 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JUDITH A WATERMAN**

Mailing Address **1142 PAPER FIG COURT**

City <b>SANIBEL</b>	State <b>FL</b>	Zip Code <b>33957</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**DEVELOPER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128067**

Date of Receipt

**08 / 12 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JUDITH A WATERMAN**

Mailing Address **1142 PAPER FIG COURT**

City <b>SANIBEL</b>	State <b>FL</b>	Zip Code <b>33957</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**DEVELOPER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128068**

Date of Receipt

**08 / 12 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**6400.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1774 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET WATERMAN**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128070**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY WATERMAN**

Mailing Address 1011 WEBER AVE

City

**WISCONSIN DELLS**

State

**WI**

Zip Code

**53965**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128072**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DON L WATERS**

Mailing Address 35 ISLAND DRIVE

City

**SAVANNAH**

State

**GA**

Zip Code

**31406**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128074**

Date of Receipt

**09 / 08 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1775 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES WATKINS**

Mailing Address 18000 SARAH HILL LN

City LAKE OSWEGO	State OR	Zip Code 97035
---------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WAVE FORM SYSTEMS, INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128076**

Date of Receipt

M M / D D / Y Y Y Y
07 / 21 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RONNIE WATKINS**

Mailing Address 129 SOMERSET PASS

City GADSDEN	State AL	Zip Code 35901
-----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RONNIE WATKINS FORD

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128078**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID WATTERS**

Mailing Address 1979 TUMBLEBROOK RD

City NEENAH	State WI	Zip Code 54956
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WATTERS INSURANCE

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128080**

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1776 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DARYL WATTERSON**

Mailing Address **N8146 MARTY RD**

City	State	Zip Code
<b>NEW GLARUS</b>	<b>WI</b>	<b>53574</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128082**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>06</b>		<b>2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES WAX**

Mailing Address **PO BOX 3295**

City	State	Zip Code
<b>RANCHO SANTA</b>	<b>CA</b>	<b>92067</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WAXIE SANUTARY SUPPLY**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1500.00**

**Transaction ID : SA17A.128084**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>07</b>		<b>30</b>		<b>2015</b>

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**R. L WEATHERS**

Mailing Address **561 VILLAGE TRACE, BLDG**

City	State	Zip Code
<b>MARIETTA</b>	<b>GA</b>	<b>30067</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**400.00**

**Transaction ID : SA17A.128085**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>26</b>		<b>2015</b>

Amount of Each Receipt this Period

**200.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1950.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1777 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GARY WEAVER**

Mailing Address 3502 MENTANA PLACE

City	State	Zip Code
SAN ANTONIO	TX	78258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128087**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY WEAVER**

Mailing Address 3502 MENTANA PLACE

City	State	Zip Code
SAN ANTONIO	TX	78258

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

**Transaction ID : SA17A.128088**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

30.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOAN WEBB**

Mailing Address 936 LIDO CIR W

City	State	Zip Code
NICEVILLE	FL	32578

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128090**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

780.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1778 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD WEBB**

Mailing Address 936 LIDO CIR W

City	State	Zip Code
NICEVILLE	FL	32578

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128092**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SCOTT WEBER**

Mailing Address 2601 SUNSET BLVD APT 3G

City	State	Zip Code
MINNEAPOLIS	MN	55416

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2710.00

**Transaction ID : SA17A.128093**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOEL S WEBSTER**

Mailing Address 7121 CYPRESS CREEK L

City	State	Zip Code
CHARLOTTE	NC	28210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128095**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**YASITH WEERASURIYA**

Mailing Address **2807 CATALPA ST**

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STANBRIDGE COLLEGE**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

**Transaction ID : SA17A.128097**

Date of Receipt

**07 / 06 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**YASITH WEERASURIYA**

Mailing Address **2807 CATALPA ST**

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STANBRIDGE COLLEGE**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128097.0**

Date of Receipt

**07 / 06 / 2015**

REATTRIBUTION TO LU ANN WEERASURIYA

Amount of Each Receipt this Period

-4600.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LU ANN WEERASURIYA**

Mailing Address **2807 CATALPA STREET**

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

**Transaction ID : SA17A.128097.1**

Date of Receipt

**07 / 06 / 2015**

REATTRIBUTION FROM YASITH WEERASURIYA;  
SEE REDESIGNATION

Amount of Each Receipt this Period

4600.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

10000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1780 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LU ANN WEERASURIYA**

Mailing Address **2807 CATALPA STREET**

City <b>NEWPORT BEACH</b>	State <b>CA</b>	Zip Code <b>92660</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128097.2**

Date of Receipt

**07 / 06 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

**-1900.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LU ANN WEERASURIYA**

Mailing Address **2807 CATALPA STREET**

City <b>NEWPORT BEACH</b>	State <b>CA</b>	Zip Code <b>92660</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**4600.00**

**Transaction ID : SA17A.128097.3**

Date of Receipt

**07 / 06 / 2015**

**REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015**

Amount of Each Receipt this Period

**1900.00**

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**YASITH WEERASURIYA**

Mailing Address **2807 CATALPA ST**

City <b>NEWPORT BEACH</b>	State <b>CA</b>	Zip Code <b>92660</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**STANBRIDGE COLLEGE**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128097.4**

Date of Receipt

**07 / 06 / 2015**

**REDESIGNATION TO GENERAL**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**0.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1781 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**YASITH WEERASURIYA**

Mailing Address 2807 CATALPA ST

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
STANBRIDGE COLLEGE

Occupation  
PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128097.5**

Date of Receipt

**07** / **06** / **2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/19/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TIMOTHY WEGGE**

Mailing Address 31331 ACADEMY RD

City	State	Zip Code
BURLINGTON	WI	53105

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128102**

Date of Receipt

**08** / **01** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES WEGNER**

Mailing Address PO BOX 261

City	State	Zip Code
WEST CHICAGO	IL	60186

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128104**

Date of Receipt

**09** / **16** / **2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1782 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EILEEN D WEICHER**

Mailing Address 537 N EUCLID AVE

City	State	Zip Code
OAK PARK	IL	60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128106**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**R J WEIKAL**

Mailing Address 5435 N GARLAND AVE  
STE 140 # 167

City	State	Zip Code
GARLAND	TX	75040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128108**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AL WEILAND**

Mailing Address 3833 W. MICHIGAN ST.

City	State	Zip Code
MILWAUKEE	WI	53208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128110**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1783 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUE ANN WEINBERG**

Mailing Address 70 FIELD POINT CIR

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128112**

Date of Receipt

**08 / 17 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LEON WEINBERGER**

Mailing Address 25013 VADO COURT

City	State	Zip Code
RIO VERDE	AZ	85263

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128114**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KANE WEINER**

Mailing Address 3448 LOCKE LANE

City	State	Zip Code
HOUSTON	TX	77027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEXAS CRUDE ENE

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128116**

Date of Receipt

**09 / 03 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1784 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT WEINER**

Mailing Address 2 LEIGHTON CT

City	State	Zip Code
ATLANTA	GA	30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOTALLY ENTERPRISES, LLC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128118**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT WEINERT**

Mailing Address PO BOX 316

City	State	Zip Code
WHELAN	WI	54247

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CRAFTS INC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128120**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 22 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEVE WEINERT**

Mailing Address 3616 SHEPHERD LANE

City	State	Zip Code
MANITOWOC	WI	54220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CRAFTS INC

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128122**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1785 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FLORENCE WEINHOLD**

Mailing Address 3319 CAPRI COURT

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128124**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN WEINMANN**

Mailing Address 601 POYDRAS STREET, SUITE 2690

City	State	Zip Code
NEW ORLEANS	LA	70130

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128126**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NATHAN WEINSTEIN**

Mailing Address 170 TOWNSEND AVE

City	State	Zip Code
PELHAM	NY	10803

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CL KING

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128128**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1786 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PERRY WEINSTEIN**

Mailing Address **2475 WOODLAWN RD**

City	State	Zip Code
<b>NORTHBROOK</b>	<b>IL</b>	<b>60062</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PERRY WEINSTEIN, INC.**

Occupation  
**CPA**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128130**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PATRICK WEIR**

Mailing Address **21332 CELTIC ST**

City	State	Zip Code
<b>CHATSWORTH</b>	<b>CA</b>	<b>91311</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COONER WIRE**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.128132**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BARTON WEIS**

Mailing Address **465 OAK CIRCLE**

City	State	Zip Code
<b>CHARLOTTESVIL</b>	<b>VA</b>	<b>22901</b>

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CVILLE ORTHODONTIST**

Occupation  
**ORTHODONTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128134**

Date of Receipt

**09 / 04 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**4000.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1787 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DARLENE T WEIS**

Mailing Address **N19W26655 MILKWEED L**

City <b>PEWAUKEE</b>	State <b>WI</b>	Zip Code <b>53072</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128136**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CAROL R. WEISS**

Mailing Address **720 HEATHER COURT**

City <b>GRAFTON</b>	State <b>WI</b>	Zip Code <b>53024</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128138**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY WEISS**

Mailing Address **1304 HAWTHORNE LANE**

City <b>HINSDALE</b>	State <b>IL</b>	Zip Code <b>60521</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128140**

Date of Receipt

**07 / 31 / 2015**

**SEE REDESIGNATION**

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**6650.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1788 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY WEISS**

Mailing Address 1304 HAWTHORNE LANE

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128866**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY WEISS**

Mailing Address 1304 HAWTHORNE LANE

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128867**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD WEISS**

Mailing Address 1304 HAWTHORNE LANE

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128142**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1789 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****RICHARD WEISS**

Mailing Address 1304 HAWTHORNE LANE

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.128143**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****RICHARD WEISS**

Mailing Address 1304 HAWTHORNE LANE

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16200.00

**Transaction ID : SA17A.128144**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****RICHARD WEISS**

Mailing Address 1304 HAWTHORNE LANE

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10800.00

**Transaction ID : SA17A.128145**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

**CHARGEBACK**

Amount of Each Receipt this Period

-5400.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1790 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD WEISS**

Mailing Address **1304 HAWTHORNE LANE**

City <b>HINSDALE</b>	State <b>IL</b>	Zip Code <b>60521</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128146**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

**CHARGEBACK**

Amount of Each Receipt this Period

**-5400.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD WEISS**

Mailing Address **1304 HAWTHORNE LANE**

City <b>HINSDALE</b>	State <b>IL</b>	Zip Code <b>60521</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128868**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

**SEE REDESIGNATION**

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD WEISS**

Mailing Address **1304 HAWTHORNE LANE**

City <b>HINSDALE</b>	State <b>IL</b>	Zip Code <b>60521</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128869**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

**REDESIGNATED**

Amount of Each Receipt this Period

**2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**-5400.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1791 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GORDON WELCH**

Mailing Address 435 COUNTRY OAKS DR

City	State	Zip Code
EL PASO	TX	79932

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128147**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES V WELDEN**

Mailing Address 7418 ASHLAND LANE

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128149**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES V WELDEN**

Mailing Address 7418 ASHLAND LANE

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128150**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

-250.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

600.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1792 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHARLES V WELDEN**

Mailing Address 7418 ASHLAND LANE

City	State	Zip Code
BIRMINGHAM	AL	35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128151**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ED WELDEN**

Mailing Address 90 COUNTRY CLUB BOULEVA

City	State	Zip Code
BIRMINGHAM	AL	35213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SPM, LLC

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.128153**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDGAR WELDEN**

Mailing Address 1029 22ND STREET SOUTH

City	State	Zip Code
BIRMINGHAM	AL	35205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128155**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1793 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM B WELDEN**

Mailing Address 2725 SOUTHWOOD ROAD

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SPM, LLC

Occupation  
PROPERTY MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128157**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM B WELDEN**

Mailing Address 2725 SOUTHWOOD ROAD

City	State	Zip Code
BIRMINGHAM	AL	35223

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SPM, LLC

Occupation  
PROPERTY MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.128158**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAUREN H WELDON**

Mailing Address 4219 OLD BROOK LANE

City	State	Zip Code
BIRMINGHAM	AL	35243

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128160**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

REATTRIBUTED

Amount of Each Receipt this Period

250.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1794 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J. S WELLS**

Mailing Address 305 RUNNING BEAR CT

City	State	Zip Code
EULESS	TX	76039

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CITIWIDE ALLIANCE REALTY

Occupation  
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128162**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARK WELP**

Mailing Address 7108 BAREFOOT COVE

City	State	Zip Code
AUSTIN	TX	78730

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
BUSINESS OWNER

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128164**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAXWELL WELZ**

Mailing Address 26 SOUTH WASHINGTON STREET

City	State	Zip Code
PORT WASHINGTON	NY	11050

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CINE MAGIC EAST RIVER STUDIOS

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128166**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 1795 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC****A. Full Name (Last, First, Middle Initial)****ROSEMARI WENDT**

Mailing Address 39 WILSHIRE RD

City	State	Zip Code
GREENWICH	CT	06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128168**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item**B. Full Name (Last, First, Middle Initial)****DENNIS WENGER**

Mailing Address W244 N4880 SWAN RD

City	State	Zip Code
PEWAUKEE	WI	53072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128170**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item**C. Full Name (Last, First, Middle Initial)****JOHN WENTZELL**

Mailing Address 12 BAY PATH DRIVE

City	State	Zip Code
BOYLSTON	MA	01505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128172**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1796 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN WENUM**

Mailing Address 427 HUNTERS HILL TRAIL

City	State	Zip Code
COLGATE	WI	53017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128174**

Date of Receipt

**07 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN WENUM**

Mailing Address 427 HUNTERS HILL TRAIL

City	State	Zip Code
COLGATE	WI	53017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128174.0**

Date of Receipt

**07 / 07 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHERRY NESS-WENUM**

Mailing Address 427 HUNTERS HILL TRAIL

City	State	Zip Code
COLGATE	WI	53017

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128174.1**

Date of Receipt

**07 / 07 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1797 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**PATRICIA WERDERITSCH**

Mailing Address 6371 SALINE ANN ARBOR RD.

City	State	Zip Code
SALINE	MI	48176

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
A.C.M.

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.128175**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ARTHUR WERNER**

Mailing Address 175 S, LEGEND TREE DRIVE

City	State	Zip Code
LIBERTY LAKE	WA	99019

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128177**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK WESHINSKEY**

Mailing Address 11194 EDWARDS FARM LN

City	State	Zip Code
PURCELLVILLE	VA	20132

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128179**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1798 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**NANCY WESLEY**

Mailing Address 25 SPRUCE ST

City	State	Zip Code
PRINCETON JUN	NJ	08550

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

**Transaction ID : SA17A.128180**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DOUGLAS WEST**

Mailing Address 13903 S GOLDEN OAK DRIVE

City	State	Zip Code
HOMER GLEN	IL	60491

FEC ID number of contributing federal political committee.

C

Name of Employer  
LOCKPORT TOWNSHIP HIGH SCHOOL

Occupation  
TEACHER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128182**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN WEST**

Mailing Address 1119 CROWN POINTE CIRCLE

City	State	Zip Code
SUAMICO	WI	54173

FEC ID number of contributing federal political committee.

C

Name of Employer  
FOX VALLEY METAL TECH

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

**Transaction ID : SA17A.128183**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1799 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARL WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128185**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 04 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHART WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

C

Name of Employer  
WESTCOTT LLC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128187**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHART WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

C

Name of Employer  
WESTCOTT LLC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128188**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1800 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHART WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WESTCOTT LLC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128188.0**

Date of Receipt

**09 / 04 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHART WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WESTCOTT LLC

Occupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128188.1**

Date of Receipt

**09 / 04 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**COURT WESTCOTT**

Mailing Address 100 CRESCENT COURT, STE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
WESTCOTT LLC

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128190**

Date of Receipt

**06 / 30 / 2015**

SEE REATTRIBUTION; \$2,700 REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1801 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**COURT WESTCOTT**

Mailing Address 100 CRESCENT COURT, STE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WESTCOTT LLC**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128190.0**

Date of Receipt

**06 / 30 / 2015**

REATTRIBUTION TO KAMERON WESTCOTT

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAMERON WESTCOTT**

Mailing Address 100 CRESCENT COURT, STE 1620

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128190.1**

Date of Receipt

**06 / 30 / 2015**

REATTRIBUTION FROM COURT WESTCOTT

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIMMY WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1628

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WESTCOTT FOUND**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128192**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1802 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JIMMY WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1628

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WESTCOTT FOUND**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128193**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

SEE REDESIGNATION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIMMY WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1628

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WESTCOTT FOUND**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128193.0**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JIMMY WESTCOTT**

Mailing Address 100 CRESCENT COURT, SUITE 1628

City	State	Zip Code
DALLAS	TX	75201

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WESTCOTT FOUND**

Occupation  
**PRESIDENT**

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128193.1**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

REDESIGNATION FROM PRIMARY; REFUNDED ON 11/16/2015

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1803 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT WESTCOTT**

Mailing Address 507 W WILSON ST

City	State	Zip Code
MADISON	WI	53703

FEC ID number of contributing federal political committee.

C

Name of Employer  
EPIC SYSTEMS CORPORATION

Occupation  
TECHNICAL SERVICES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

**Transaction ID : SA17A.128195**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Receipt this Period

230.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CHARLES WESTLEY**

Mailing Address 12976 WEST 78TH CIRCLE

City	State	Zip Code
ARVADA	CO	80005

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128196**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MERINDA H WETHERINGT**

Mailing Address 105 GOLF DR

City	State	Zip Code
FAYETTEVILLE	TN	37334

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMERICAN DEVELOPMENT CORPORATION

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2650.00

**Transaction ID : SA17A.128198**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

REATTRIBUTED

Amount of Each Receipt this Period

2650.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

330.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1804 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**W MICHAEL WETHERINGT**

Mailing Address 105 GOLF DR

City

FAYETTEVILLE

State

TN

Zip Code

37334

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

AMERICAN DEVELOPMENT CORP

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5300.00

**Transaction ID : SA17A.128200**

Date of Receipt

**07 / 01 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**W MICHAEL WETHERINGT**

Mailing Address 105 GOLF DR

City

FAYETTEVILLE

State

TN

Zip Code

37334

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

AMERICAN DEVELOPMENT CORP

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2650.00

**Transaction ID : SA17A.128201**

Date of Receipt

**07 / 01 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2650.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK WEYERMULLE**

Mailing Address 1239 N DEARBORN ST

City

CHICAGO

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

WEYERMULLER PROPERTIES LLC

Occupation

PROPERTY MANAGEMENT SERVICES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128203**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5550.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1805 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK WEYERMULLE**

Mailing Address 1239 N DEARBORN ST

City	State	Zip Code
CHICAGO	IL	60610

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WEYERMULLER PROPERTIES LLC**

Occupation  
**PROPERTY MANAGEMENT SERVICES**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

**Transaction ID : SA17A.128204**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

75.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LARRY WEYERS**

Mailing Address 939 URBANDALE AVENUE

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128206**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RONALD WEYERS**

Mailing Address PO BOX 12057

City	State	Zip Code
GREEN BAY	WI	54307

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128208**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2075.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1806 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL WHATLEY**

Mailing Address 120 SUMMER BREEZE LANE

City	State	Zip Code
FREDERICKSBURG	VA	22406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HBW RESOURCES

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128210**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN WHEELER**

Mailing Address 205 REDCLIFFE RD

City	State	Zip Code
GREENVILLE	SC	29615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RESTORATION SERVICES OF THE  
CAROLINAS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128212**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOHN WHEELER**

Mailing Address 205 REDCLIFFE RD

City	State	Zip Code
GREENVILLE	SC	29615

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RESTORATION SERVICES OF THE  
CAROLINAS

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

**Transaction ID : SA17A.128213**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		25		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3225.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1807 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TONI WHEELER**

Mailing Address 255 15TH CIR

City	State	Zip Code
KEY COLONY BEACH	FL	33051

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128215**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TONI WHEELER**

Mailing Address 4631 S RACINE

City	State	Zip Code
CHICAGO	IL	60609

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128217**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**STEPHEN T WHELAN**

Mailing Address 165 W END AVE

City	State	Zip Code
NEW YORK	NY	10023

FEC ID number of contributing federal political committee.

C

Name of Employer  
BLANK ROME LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128219**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1808 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HAROLD WHISTLER**

Mailing Address 116 HUNTINGTON COURT

City	State	Zip Code
WILLIAMSVILLE	NY	14221

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128221**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRUCE WHITAKER**

Mailing Address 25171 BLACK HORSE LN

City	State	Zip Code
LAGUNA HILLS	CA	92653

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128223**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ELIZABETH WHITAKER**

Mailing Address 19 GRAYLYN AVENUE

City	State	Zip Code
WINSTON-SALEM	NC	27106

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128225**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1809 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN WHITAKER**

Mailing Address **19 GRAYLYN PLACE**

City <b>WINSTON-SALEM</b>	State <b>NC</b>	Zip Code <b>27106</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128227**

Date of Receipt

**08 / 07 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GERALD WHITBURN**

Mailing Address **827 PARCHER STREET**

City <b>WAUSAU</b>	State <b>WI</b>	Zip Code <b>54403</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128229**

Date of Receipt

**08 / 12 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ARTHUR WHITE**

Mailing Address **1271 CHATEAU ROAD**

City <b>PASADENA</b>	State <b>CA</b>	Zip Code <b>91105</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INVESTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.128231**

Date of Receipt

**06 / 29 / 2015**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**7900.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1810 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EDDIE WHITE**

Mailing Address 304 W BROAD ST

City	State	Zip Code
ELIZABETHTOWN	NC	28337

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**BUSINESS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128233**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JIM WHITE**

Mailing Address 1815 PTARMIGAN TRL

City	State	Zip Code
ESTES PARK	CO	80517

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128235**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARTHA G WHITE**

Mailing Address 8816 MAIN STREET

City	State	Zip Code
NORTH RICHLAN	TX	76182

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128237**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1811 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL WHITE**

Mailing Address 743 OLD TOWER RD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128239**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICH WHITE**

Mailing Address 489 PLAZA LANE

City	State	Zip Code
PLYMOUTH	WI	53073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KABA

Occupation  
SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128241**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER WHITE**

Mailing Address 11523 WENDOVER LANE

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ECONOMY POLYMERS AND CHEMICALS

Occupation  
COO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128243**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3450.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1812 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLARD WHITE**

Mailing Address **8816 MAIN ST.**

City	State	Zip Code
<b>N. RICHLND HL</b>	<b>TX</b>	<b>76182</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128245**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>17</b>		<b>2015</b>

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALBERT WHITEHEAD**

Mailing Address **6506 S LEWIS AVE**

City	State	Zip Code
<b>TULSA</b>	<b>OK</b>	<b>74136</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EMPIRE PETROLEUM PARTNERS LL**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128247**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>08</b>		<b>03</b>		<b>2015</b>

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALBERT WHITEHEAD**

Mailing Address **6506 S LEWIS AVE**

City	State	Zip Code
<b>TULSA</b>	<b>OK</b>	<b>74136</b>

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**EMPIRE PETROLEUM PARTNERS LL**

Occupation  
**PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1100.00**

**Transaction ID : SA17A.128248**

Date of Receipt

M M	/	D D	/	Y Y Y Y
<b>09</b>		<b>03</b>		<b>2015</b>

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1350.00**

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1813 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM WHITEHURST**

Mailing Address 130 THORNOAK DR

City	State	Zip Code
MARTIN	TN	38237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128249**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CRAIG R WHITING**

Mailing Address 246 DUBOIS AVE

City	State	Zip Code
STATEN ISLAND	NY	10310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHORITY

Occupation  
SUBWAY TRACK WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128251**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT WHITLEY**

Mailing Address 5011 AVENUE B

City	State	Zip Code
TORRANCE	CA	90505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128253**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1814 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CHRISTIA P WHITON**

Mailing Address 900 BUSH ST

City	State	Zip Code
SAN FRANCISCO	CA	94109

FEC ID number of contributing federal political committee.

C

Name of Employer  
DC INTERNATIONAL ADVISORY

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128255**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GARY WHITTAKER**

Mailing Address 746 RUSTIC LN

City	State	Zip Code
MOUNTAIN VIEW	CA	94040

FEC ID number of contributing federal political committee.

C

Name of Employer  
1TALON LLC

Occupation  
MANAGING MEMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128257**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**A. WHOWELL**

Mailing Address 384 NORTH SHORE DRIV

City	State	Zip Code
FONTANA	WI	53125

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128259**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1815 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHY E WICHERT**

Mailing Address 13300 W SADDLEBOW DR

City	State	Zip Code
RENO	NV	89511

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128261**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL WICKMAN**

Mailing Address 333 KRESS CT

City	State	Zip Code
GREEN BAY	WI	54301

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
IOD INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128263**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS J WICKMAN**

Mailing Address 1200 N MAYFAIR RD

City	State	Zip Code
MILWAUKEE	WI	53226

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
LEGACY CAPITAL PARTNERS

Occupation  
COUNSEL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128265**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1816 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY WIDINER**

Mailing Address 625 N LA PATERA

City	State	Zip Code
GOLETA	CA	93117

FEC ID number of contributing federal political committee.

C

Name of Employer  
WALPOLE & CO., LLP

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128267**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**T. WIDMAN**

Mailing Address 26176 FAIRMOUNT BOULEVARD

City	State	Zip Code
BEACHWOOD	OH	44122

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.128268**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**AMY WIECKERT**

Mailing Address 1 WEATHERSTONE DR

City	State	Zip Code
APPLETON	WI	54914

FEC ID number of contributing federal political committee.

C

Name of Employer  
WIECKERT REAL ESTATE

Occupation  
BROKERAGE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128270**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1817 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICK WIEGAND**

Mailing Address 2308 W WISCONSIN AVE

City	State	Zip Code
MILWAUKEE	WI	53233

FEC ID number of contributing federal political committee.

C

Name of Employer  
AMBASSADOR HOTEL

Occupation  
0

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128272**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD WIEHL**

Mailing Address 204 SPRING HILL RD

City	State	Zip Code
TRUMBULL	CT	06611

FEC ID number of contributing federal political committee.

C

Name of Employer  
CONSUMERS PETROLEUM

Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128274**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MAYRA B WIESSNER**

Mailing Address 3 ARROWHEAD LN

City	State	Zip Code
ROLLING HILLS	CA	90274

FEC ID number of contributing federal political committee.

C

Name of Employer  
ATLAS ENGINE REBUILDING

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128276**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1818 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JOHN WIGHT**

Mailing Address 1909 E WINTER DR

City	State	Zip Code
PHOENIX	AZ	85020

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.128277**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SHIRLEY WIKER**

Mailing Address 32766 HALEY ROAD

City	State	Zip Code
DOWAGIAC	MI	49047

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ACCOUNTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.128279**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER WILD**

Mailing Address 41-473 KALANIANA'OLE

City	State	Zip Code
WAIMANALO	HI	96795

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128281**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1819 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER WILD**

Mailing Address **41-473 KALANIANA'OLE**

City <b>WAIMANALO</b>	State <b>HI</b>	Zip Code <b>96795</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.128282**

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WALTER WILD**

Mailing Address **41-473 KALANIANA'OLE**

City <b>WAIMANALO</b>	State <b>HI</b>	Zip Code <b>96795</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00**

**Transaction ID : SA17A.128283**

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WALTER WILD**

Mailing Address **41-473 KALANIANA'OLE**

City <b>WAIMANALO</b>	State <b>HI</b>	Zip Code <b>96795</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**550.00**

**Transaction ID : SA17A.128284**

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1820 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WILLIAM WILEMON**

Mailing Address 29855 HIDDENWOOD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DEVICEPHARM, INC.

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128286**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LAWRENCE A WILEY**

Mailing Address 108 N GREEN BAY RD

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AKIN GUMP SC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128288**

Date of Receipt

**07 / 22 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAWRENCE A WILEY**

Mailing Address 108 N GREEN BAY RD

City	State	Zip Code
APPLETON	WI	54911

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
AKIN GUMP SC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128289**

Date of Receipt

**07 / 22 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1821 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICK WILEY**

Mailing Address 3303 ROSEFINCH TRL

City	State	Zip Code
AUSTIN	TX	78746

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
1060 GROUP

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128291**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RITA WILHELM**

Mailing Address 884 PEBBLEBROOK LANE

City	State	Zip Code
EAST LANSING	MI	48823

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128293**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROSE WILKES**

Mailing Address 316 N RIDGELAND AVE.

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

**Transaction ID : SA17A.128294**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1822 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROSE WILKES**

Mailing Address **316 N RIDGELAND AVE.**

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**290.00**

**Transaction ID : SA17A.128295**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD L WILKEY**

Mailing Address **5112 STATE ROAD 83**

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE FISHER BARTON GROUP**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**5400.00**

**Transaction ID : SA17A.128297**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD L WILKEY**

Mailing Address **5112 STATE ROAD 83**

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**THE FISHER BARTON GROUP**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128298**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**5450.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1823 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SUSAN WILKEY**

Mailing Address 5112 STATE ROAD 83

City	State	Zip Code
HARTLAND	WI	53029

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
CHENEQUA COUNTRY CLUB

Occupation  
TRUSTEE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128300**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY K WILLARD**

Mailing Address PO BOX 3269

City	State	Zip Code
SHEPHERDSTOWN	WV	25443

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128302**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DAVID WILLEFORD**

Mailing Address 1870 IMPERIAL RD

City	State	Zip Code
OSHKOSH	WI	54904

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
H. DERKSEN & SONS. CO.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128304**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1824 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**TODD A WILLER**

Mailing Address **W1545 GOLDEN GLOW ROAD**

City <b>FREEDOM</b>	State <b>WI</b>	Zip Code <b>54130</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128306**

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**STEPHEN D WILLETT**

Mailing Address **300 STORMS RD**

City <b>PHILLIPS</b>	State <b>WI</b>	Zip Code <b>54555</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.128307**

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS WILLETT**

Mailing Address **10165 OXFORD RD**

City <b>NIWOT</b>	State <b>CO</b>	Zip Code <b>80504</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128309**

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**3300.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1825 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID WILLIAMS**

Mailing Address 135 MILLWYCK RD

City	State	Zip Code
LITITZ	PA	17543

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128311**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVID WILLIAMS**

Mailing Address 135 MILLWYCK RD

City	State	Zip Code
LITITZ	PA	17543

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17A.128312**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DAVID WILLIAMS**

Mailing Address 2460 HILL RD

City	State	Zip Code
FAIRBANKS	AK	99709

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

**Transaction ID : SA17A.128313**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		16		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2050.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1826 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAVID WILLIAMS**

Mailing Address 2460 HILL RD

City	State	Zip Code
FAIRBANKS	AK	99709

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

**Transaction ID : SA17A.128314**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

35.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDGAR H WILLIAMS**

Mailing Address 2900 COVE CAY DRIVE, APT 3G

City	State	Zip Code
CLEARWATER	FL	33760

FEC ID number of contributing federal political committee.

C

Name of Employer  
LEGACY CAPITAL GROUP INC.

Occupation  
COMMODITY POOL OPERATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128316**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EDITH WILLIAMS**

Mailing Address NP63 LAKE CHEROKEE

City	State	Zip Code
LONGVIEW	TX	75603

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128686**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2735.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1827 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GLENN WILLIAMS**

Mailing Address 1090 BROOKSGLEN DRIVE

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
US PLANNING GROUP

Occupation  
FINANCIAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.128318**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HEATH WILLIAMS**

Mailing Address 2056 MCLENDON AVE NE

City	State	Zip Code
ATLANTA	GA	30307

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HEATH W. WILLIAMS, LLC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128320**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**HERSCHEL WILLIAMS**

Mailing Address 9453 JAMAICA BEACH

City	State	Zip Code
GALVESTON	TX	77554

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
THE INTEGRAL GROUP

Occupation  
OWNER - SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128322**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

720.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1828 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**J D WILLIAMS**

Mailing Address 30 EAST FOX CHASE ROAD

City	State	Zip Code
ASHEVILLE	NC	28804

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128324**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES WILLIAMS**

Mailing Address PO BOX 533

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128326**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KEITH WILLIAMS**

Mailing Address 8437 BOIS D ARC LN

City	State	Zip Code
RICHMOND	TX	77406

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SKYHAWK CHEMICALS, INC.

Occupation  
CHEMICAL SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128328**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1829 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LACY WILLIAMS**

Mailing Address **NP63 LAKE CHEROKEE**

City	State	Zip Code
LONGVIEW	TX	75603

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**-2700.00**

**Transaction ID : SA17A.128684**

Date of Receipt

**07 / 08 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LINDA WILLIAMS**

Mailing Address **PO BOX 1657**

City	State	Zip Code
TEMECULA	CA	92593

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**RESTAURANTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**215.00**

**Transaction ID : SA17A.128329**

Date of Receipt

**09 / 19 / 2015**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDSEY WILLIAMS**

Mailing Address **53265 TROON TRL**

City	State	Zip Code
LA QUINTA	CA	92253

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128331**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1025.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1830 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MANSFIEL WILLIAMS**

Mailing Address 118 GOMEZ RD

City

HOBE SOUND

State

FL

Zip Code

33455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128332**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MANSFIELD WILLIAMS**

Mailing Address 118 GOMEZ ROA

City

HOBE SOUND

State

FL

Zip Code

33455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128333**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NOAH WILLIAMS**

Mailing Address 4893 FOXFIRE TRAIL

City

MIDDLETON

State

WI

Zip Code

53562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNIVERSITY OF WISCONSIN

Occupation

PROFESSOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128335**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1831 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT WILLIAMS**

Mailing Address **5800 CROOKS RD**

City State Zip Code  
**TROY MI 48098**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CADILLAC PRODUCTS INC**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128337**

Date of Receipt

**07 / 31 / 2015**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LACY WILLIAMS II**

Mailing Address **7 DUNNAM LANE**

City State Zip Code  
**HOUSTON TX 77024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TEXLA ENERGY MANAGEMENT, INC**

Occupation  
**TRADING**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128339**

Date of Receipt

**06 / 18 / 2015**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EARNST WILLIAMSON**

Mailing Address **1812 FRENCHMANS CROSSING**

City State Zip Code  
**FORT WAYNE IN 46825**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128341**

Date of Receipt

**07 / 15 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**4200.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1832 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EARNEST WILLIAMSON**

Mailing Address 1812 FRENCHMANS CROSSING

City	State	Zip Code
FORT WAYNE	IN	46825

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.128342**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EARNEST WILLIAMSON**

Mailing Address 1812 FRENCHMANS CROSSING

City	State	Zip Code
FORT WAYNE	IN	46825

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

709.00

**Transaction ID : SA17A.128343**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Receipt this Period

109.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK WILLIAMSON**

Mailing Address 5519 S GRANDVIEW ST

City	State	Zip Code
LITTLE ROCK	AR	72207

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MARK V WILLAMSON CO INC

Occupation  
I.H.S. AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128345**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

459.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1833 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARK WILLIAMSON**

Mailing Address 5519 S GRANDVIEW ST

City	State	Zip Code
LITTLE ROCK	AR	72207

FEC ID number of contributing federal political committee.

C

Name of Employer  
MARK V WILLAMSON CO INC

Occupation  
I.H.S. AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128346**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CLAYTON WILLMAN**

Mailing Address 1533 GOLF VIEW DR. E.

City	State	Zip Code
SHEBOYGAN	WI	53083

FEC ID number of contributing federal political committee.

C

Name of Employer  
WILLMAN IND

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128348**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BENJAMIN WILLNER**

Mailing Address 155 AIRDALE RD

City	State	Zip Code
BRYN MAWR	PA	19010

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128350**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3950.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1834 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRUCE WILSON**

Mailing Address 1600 NORTH SIDE DRIVE

City	State	Zip Code
ATLANTA	GA	30318

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

**Transaction ID : SA17A.128352**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

275.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD WILSON**

Mailing Address 19160 STILL POINT TRAIL

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128356**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD WILSON**

Mailing Address 19160 STILL POINT TRAIL

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128356.0**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5675.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1835 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KATHLEEN WILSON**

Mailing Address 19160 STILL POINT ROAD

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128356.1**

Date of Receipt

**06 / 24 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**DONALD WILSON**

Mailing Address 19160 STILL POINT TRAIL

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128354**

Date of Receipt

**08 / 18 / 2015**

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DONALD WILSON**

Mailing Address 19160 STILL POINT TRAIL

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128354.0**

Date of Receipt

**08 / 18 / 2015**

REDESIGNATION TO GENERAL

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1836 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD WILSON**

Mailing Address 19160 STILL POINT TRAIL

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8100.00

**Transaction ID : SA17A.128354.1**

Date of Receipt

**08 / 18 / 2015**

REDESIGNATION FROM PRIMARY; REFUNDED ON 12/10/2015

Amount of Each Receipt this Period

5400.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JEANNE WILSON**

Mailing Address 34 GALWAY PLACE

City	State	Zip Code
THE WOODLANDS	TX	77382

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128358**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JOELLEN WILSON**

Mailing Address 5749 W BUENA VISTA AVEN

City	State	Zip Code
VISALIA	CA	93291

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128360**

Date of Receipt

**07 / 23 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1837 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MICHAEL WILSON**

Mailing Address 5113 SOUTHWEST PARKWAY #115

City	State	Zip Code
AUSTIN	TX	78735

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DAVIS & WRIGHT PC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128362**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHIL WILSON**

Mailing Address 600 LANE 280 LAKE JA

City	State	Zip Code
ANGOLA	IN	46703

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128364**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD WILSON**

Mailing Address 11475 CAGLE RD

City	State	Zip Code
ARBOR VITAE	WI	54568

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PUKALL LUMBER

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128366**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1838 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT P WILSON**

Mailing Address 1040 CANYON CREEK CT

City	State	Zip Code
WATKINSVILLE	GA	30677

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128368**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**W. PATRICK WILSON**

Mailing Address 1701 16TH STREET NW #125

City	State	Zip Code
WASHINGTON	DC	20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128370**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		29		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SPENCE WILSON JR**

Mailing Address 311 ST ANDREWS FAIRWAY

City	State	Zip Code
MEMPHIS	TN	38111

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128372**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1050.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1839 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**GREG WINCHESTER**

Mailing Address 16035 WESTBROOK ROAD

City	State	Zip Code
MILTON	GA	30004

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**TRIMONT REAL ESTATE ADVISORS**

Occupation  
**PRINCIPAL**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128374**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JILL WINE**

Mailing Address 18515 8TH AVENUE NORTH

City	State	Zip Code
PLYMOUTH	MN	55447

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128376**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SCOTT W WINE**

Mailing Address 18515 8TH AVENUE NORTH

City	State	Zip Code
PLYMOUTH	MN	55447

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**POLARIS INDURST**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128378**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1840 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCOTT W WINE**

Mailing Address **18515 8TH AVENUE NORTH**

City	State	Zip Code
PLYMOUTH	MN	55447

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**POLARIS INDURST**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128379**

Date of Receipt

**08 / 10 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LORRAINE WINK**

Mailing Address **611 S OAKLAND AVENUE**

City	State	Zip Code
VILLA PARK	IL	60181

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.128380**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KAREN WINKLER**

Mailing Address **599 E. HOBCEW DR.**

City	State	Zip Code
MT. PLEASANT	SC	29464

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**265.00**

**Transaction ID : SA17A.128381**

Date of Receipt

**09 / 01 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**350.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1841 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**CHLOE M WINSTON**

Mailing Address **14284 INDIAN ACRES TRAIL**

City	State	Zip Code
REDDING	CA	96003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**300.00**

**Transaction ID : SA17A.128382**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			02			2015			

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD L WINTER**

Mailing Address **2700 N OCEAN DRIVE #250**

City	State	Zip Code
WEST PALM BEACH	FL	33404

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HEATH CARE INVESTMENTS,**

Occupation  
**HEALTH CARE CONSU**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128384**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			29			2015			

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD L WINTER**

Mailing Address **2700 N OCEAN DRIVE #250**

City	State	Zip Code
WEST PALM BEACH	FL	33404

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HEATH CARE INVESTMENTS,**

Occupation  
**HEALTH CARE CONSU**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

**Transaction ID : SA17A.128385**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

**1500.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2600.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1842 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CAROLYN WINTERROSE**

Mailing Address **2108 E APPLEWOOD AVE**

City <b>SALT LAKE CIT</b>	State <b>UT</b>	Zip Code <b>84121</b>
------------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128386**

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**GUS WIRTH**

Mailing Address **N48W6100 SPRING STREET**

City <b>CEDARBURG</b>	State <b>WI</b>	Zip Code <b>53012</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128388**

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**OTTO WIRTH**

Mailing Address **W10664 BASS LAKE RD**

City <b>DEERBROOK</b>	State <b>WI</b>	Zip Code <b>54424</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128390**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1150.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1843 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENISE WISEMAN**

Mailing Address 9810 STATE HIGHWAY 220

City	State	Zip Code
CASPER	WY	82604

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128392**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TODD M WITMER**

Mailing Address 1003 CORNERSTONE DR

City	State	Zip Code
MOUNT JOY	PA	17552

FEC ID number of contributing federal political committee.

C

Name of Employer  
THE WITMER GROUP

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128394**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTOP W WITZLIB**

Mailing Address 1651 WILLOW DR

City	State	Zip Code
PORT WASHINGT	WI	53074

FEC ID number of contributing federal political committee.

C

Name of Employer  
GOOD HOPE MANOR MILWAUKEE LL

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128396**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1844 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HOWARD WIXSON**

Mailing Address 4801 GREEN OAKS DR

City	State	Zip Code
COLLEYVILLE	TX	76034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DEALER INSURANCE AGENCY

Occupation  
INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128397**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HOWARD WIXSON**

Mailing Address 4801 GREEN OAKS DR

City	State	Zip Code
COLLEYVILLE	TX	76034

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DEALER INSURANCE AGENCY

Occupation  
INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17A.128398**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	5

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TIMOTHY WNUK**

Mailing Address 13350 BRAEMAR DRIVE

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ASSOCIATED BANK

Occupation  
BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128400**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1300.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1845 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BRIAN & KIM WOGERNESE**

Mailing Address 2987 ROSE MOON WAY

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

C

Name of Employer  
COBBLESTONE HOTELS, LLC

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128402**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**D. G WOGERNESE**

Mailing Address P.O. BOX 165

City	State	Zip Code
EAU CLAIRE	WI	54702

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128404**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			28			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**BONNIE WOKATSCH**

Mailing Address 2612 N 120TH AVE

City	State	Zip Code
WAUSAU	WI	54401

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128406**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			07			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1846 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ELAINE WOLD**

Mailing Address 1515 S FEDERAL HWY

City	State	Zip Code
BOCA RATON	FL	33432

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128408**

Date of Receipt

**07 / 09 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HERBERT O WOLDING**

Mailing Address PO BOX 56

City	State	Zip Code
NELSONVILLE	WI	54458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
H.O WOLDING

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128410**

Date of Receipt

**07 / 21 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**RICHARD H WOLDING**

Mailing Address PO BOX 68

City	State	Zip Code
NELSONVILLE	WI	54458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WOLDING

Occupation  
DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128412**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1847 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**AUGUST WOLF**

Mailing Address 150 SOUTHFIELD AVENUE

City	State	Zip Code
STAMFORD	CT	06902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128414**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JULIANN WOLF**

Mailing Address 920 NORTHVIEW AVE.

City	State	Zip Code
GREAT FALLS	MT	59404

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : SA17A.128415**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

50.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JULIANN WOLF**

Mailing Address 920 NORTHVIEW AVE.

City	State	Zip Code
GREAT FALLS	MT	59404

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128416**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2775.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1848 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RAND WOLF**

Mailing Address **9439 N LAKE DR**

City <b>MILWAUKEE</b>	State <b>WI</b>	Zip Code <b>53217</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**REAL ESTATE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128418**

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CAROL B WOLFE**

Mailing Address **3941 HILLTOP DR**

City <b>HURON</b>	State <b>OH</b>	Zip Code <b>44839</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128419**

Date of Receipt

M M / D D / Y Y Y Y
09 / 07 / 2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PAMELA WOLFE**

Mailing Address **1006 EDIN BOROUGH COURT**

City <b>LAKE GENEVA</b>	State <b>WI</b>	Zip Code <b>53147</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128421**

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2015

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**850.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1849 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD WOLFE**

Mailing Address **5369 RIDGE DR**

City State Zip Code  
**TRINITY NC 27370**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**220.00**

**Transaction ID : SA17A.128422**

Date of Receipt

**08 / 26 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JAMES WOLFF**

Mailing Address **409 BAYWOOD DRIVE**

City State Zip Code  
**NICEVILLE FL 32578**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128423**

Date of Receipt

**08 / 18 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NANCY WOLFORD**

Mailing Address **922 41ST STREET**

City State Zip Code  
**SACRAMENTO CA 95819**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128425**

Date of Receipt

**06 / 22 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**450.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1850 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY WOLFORD**

Mailing Address 922 41ST STREET

City	State	Zip Code
SACRAMENTO	CA	95819

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17A.128426**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TERRY WOLFRATH**

Mailing Address 4840 NAPOLI CT NE

City	State	Zip Code
SAINT PETERSB	FL	33703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17A.128428**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

Amount of Each Receipt this Period

203.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**OTTO J WOLTER**

Mailing Address 240 MONASTERY HILL DR

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WISCONSIN LIFTY

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.128429**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Amount of Each Receipt this Period

200.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

503.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1851 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD WOLTMAN**

Mailing Address 15753 EL CAMINO REAL

City	State	Zip Code
RANCHO SANTA FE	CA	92067

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.128431**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN WOMBACHER**

Mailing Address 21 BARLEY CIR

City	State	Zip Code
BLOOMINGTON	IL	61704

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128433**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MATTHEW WOMBLE**

Mailing Address 8 SOUND SHORE DRIVE, SUITE 200

City	State	Zip Code
GREENWICH	CT	06830

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
EVERWATCH CAPITAL

Occupation  
MANAGING DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128435**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1852 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**CARRIE WOOD**

Mailing Address 813 VICAR LANE

City	State	Zip Code
ALEXANDRIA	VA	22302

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128770**

Date of Receipt

**06 / 26 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT WOOD**

Mailing Address 813 VICAR LANE

City	State	Zip Code
ALEXANDRIA	VA	22302

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128437**

Date of Receipt

**06 / 26 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT WOOD**

Mailing Address 813 VICAR LANE

City	State	Zip Code
ALEXANDRIA	VA	22302

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128768**

Date of Receipt

**06 / 26 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1853 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**LEIGH C WOODALL**

Mailing Address 200 READE DR.

City	State	Zip Code
ROXBORO	NC	27573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128439**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LEIGH C WOODALL**

Mailing Address 200 READE DR.

City	State	Zip Code
ROXBORO	NC	27573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.128440**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LEIGH C WOODALL**

Mailing Address 200 READE DR.

City	State	Zip Code
ROXBORO	NC	27573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

**Transaction ID : SA17A.128441**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1854 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HENRY S WOODBRIDGE JR**

Mailing Address P.O. BOX 228

100 KINGS HIGHWAY

City

POMFRET

State

CT

Zip Code

06258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128443**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

14

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HENRY S WOODBRIDGE JR**

Mailing Address P.O. BOX 228

100 KINGS HIGHWAY

City

POMFRET

State

CT

Zip Code

06258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128444**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

14

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**WARD WOODRUFF**

Mailing Address 230 SCANTIC RD.

City

EAST WINDSOR

State

CT

Zip Code

06088

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HURLEY & DAVID, INC.

Occupation

EXECUTIVE

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128446**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2015

14

2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1855 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DOUGLAS WOODS**

Mailing Address 9201 W WYNDHAM HILLS COURT

City	State	Zip Code
FRANKLIN	WI	53132

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.128448**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**PHYLLIS WOODS**

Mailing Address 1 BARRY STREET

City	State	Zip Code
DOVER	NH	03820

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128450**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANE WORKMAN**

Mailing Address 3256 TANGLEWOOD DR

City	State	Zip Code
SPRINGDALE	AR	72764

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128452**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3170.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1856 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BEVERLY WORTH**

Mailing Address 6320 NE WOODSTOCK DR.

City	State	Zip Code
LEE'S SUMMIT	MO	64064

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BLUE SPRINGS HARLEY DAVIDSON**

Occupation  
**MOTORCYCLE DEALER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128454**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARVIN WORZELLA**

Mailing Address 2411 OPPORTUNITY LN

City	State	Zip Code
PLOVER	WI	54467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WOZELLA SONS & INC**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128456**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NORMAN WORZELLA**

Mailing Address 1911 CLAR-RE DRIVE

City	State	Zip Code
PLOVER	WI	54467

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WORZELLA & SONS INC.**

Occupation  
**OWNER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128458**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1857 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RIAN WREN**

Mailing Address 903 OAK STREET

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128460**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN WRIGHT**

Mailing Address 286 PORTRUSH LOOP

City	State	Zip Code
PAWLEYS ISLAND	SC	29585

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128462**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CARL WRIGHT**

Mailing Address 12920 MARSH LNDG

City	State	Zip Code
WEST PALM BEA	FL	33418

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128464**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1858 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**ELIZABETH WRIGHT**

Mailing Address **19 RANDOM ROAD**

City State Zip Code  
**ENGLEWOOD CO 80113**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128465**

Date of Receipt

**09 / 17 / 2015**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JAMES L WRIGHT**

Mailing Address **4279 W LINDA DRIVE**

City State Zip Code  
**DOUGLASVILLE GA 30134**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128466**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JAMES L WRIGHT**

Mailing Address **4279 W LINDA DRIVE**

City State Zip Code  
**DOUGLASVILLE GA 30134**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**350.00**

**Transaction ID : SA17A.128467**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**300.00**

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1859 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JASON R WRIGHT**

Mailing Address 11 ELDEN DR

City State Zip Code  
SADDLE RIVER NJ 07458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128469**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JASON R WRIGHT**

Mailing Address 11 ELDEN DR

City State Zip Code  
SADDLE RIVER NJ 07458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128470**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

SEE REDESIGNATION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JASON R WRIGHT**

Mailing Address 11 ELDEN DR

City State Zip Code  
SADDLE RIVER NJ 07458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SKYBRIDGE CAPITAL

Occupation  
INVESTMENT MANAGEMENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128471**

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2015

REDESIGNATED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1860 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN D WRIGHT**

Mailing Address **5476 CLEAR CREEK BOULEV**

City	State	Zip Code
FAYETTEVILLE	AR	72704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**JB HUNT**

Occupation  
**VP-OPERATIONS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128473**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LEON T WRIGHT**

Mailing Address **1006 SLATEWORTH DRIVE**

City	State	Zip Code
DURHAM	NC	27703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**225.00**

**Transaction ID : SA17A.128474**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM E WUESTHOFF**

Mailing Address **10737 N ESSEX COURT**

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128476**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**2100.00**

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1861 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DALLAS WUETHRICH**

Mailing Address 204 E HINKER RD

City	State	Zip Code
GREENWOOD	WI	54437

FEC ID number of contributing federal political committee.

C

Name of Employer  
GRASSLAND DAIRY PRODUCTS INC

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128478**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**TAYT WUETHRICH**

Mailing Address W6026 COUNTY RD. G

City	State	Zip Code
GREENWOOD	WI	54437

FEC ID number of contributing federal political committee.

C

Name of Employer  
GRASSLAND DAIRY PRODUCTS INC.

Occupation  
OWNER/CHAIRMAN OF THE BOARD

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128480**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED J WULFF**

Mailing Address 2959 S DETROIT WAY

City	State	Zip Code
DENVER	CO	80210

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128482**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1862 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**HOWARD WUGLER**

Mailing Address W234 S5370 BIG BEND RD

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIDWEST STAIRS AND IRON INC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128484**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HOWARD WUGLER**

Mailing Address W234 S5370 BIG BEND RD

City	State	Zip Code
WAUKESHA	WI	53189

FEC ID number of contributing federal political committee.

C

Name of Employer  
MIDWEST STAIRS AND IRON INC

Occupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128485**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			17			2015			

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT WURTZ**

Mailing Address 18550 W CAPITOL DRIVE

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

C

Name of Employer  
AEGIS CORPORATION

Occupation  
N/A

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128487**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2015			

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1863 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROY WUTHIER**

Mailing Address **714 VINTAGE LANE**

City	State	Zip Code
COLUMBIA	SC	29210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128488**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARY WUTKE**

Mailing Address **6 SHEFFORD CIRCLE**

City	State	Zip Code
MADISON	WI	53719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FINANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128490**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARY WUTKE**

Mailing Address **6 SHEFFORD CIRCLE**

City	State	Zip Code
MADISON	WI	53719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FINANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128491**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**600.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1864 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JEAN WYATT**

Mailing Address 18460 LAKE FORREST DRIVE

City	State	Zip Code
PENN VALLY	CA	95946

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128492**

Date of Receipt

**09 / 18 / 2015**

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICHARD WYCKOFF**

Mailing Address 800 J ST  
4

City	State	Zip Code
SACRAMENTO	CA	95814

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
DIGNITY HEALTH

Occupation  
LAWYER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128494**

Date of Receipt

**06 / 23 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**EARLE WYMER**

Mailing Address 3531 HANOVER AVE

City	State	Zip Code
RICHMOND	VA	23221

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128496**

Date of Receipt

**07 / 29 / 2015**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1865 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**EARLE WYMER**

Mailing Address 3531 HANOVER AVE

City	State	Zip Code
RICHMOND	VA	23221

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

**Transaction ID : SA17A.128497**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EARLE WYMER**

Mailing Address 3531 HANOVER AVE

City	State	Zip Code
RICHMOND	VA	23221

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

**Transaction ID : SA17A.128498**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			03			2015			

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KATHERINE WYNNE**

Mailing Address 4041 CAPPS DRIVE

City	State	Zip Code
DALLAS	TX	75209

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128500**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2015			

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1100.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1866 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARGARET WYNNE**

Mailing Address 1607 N JEFFERSON ST

City	State	Zip Code
ARLINGTON	VA	22205

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
U.S. GOVERNMENT

Occupation  
PROGRAM SPECIALIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128502**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LOUIS WYSOCKI**

Mailing Address 2041 COUNTY ROAD J

City	State	Zip Code
CUSTER	WI	54423

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128504**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SHARON L WYSOCKI**

Mailing Address 2204 COUNTY HIGHWAY

City	State	Zip Code
CUSTER	WI	54423

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128506**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1867 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RUTH YARBROUGH**

Mailing Address 16050 FONTAINE AVENUE

City	State	Zip Code
AUSTIN	TX	78734

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128508**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NATALIE F YATES**

Mailing Address 1260 OAKDALE DRIVE

City	State	Zip Code
YORK	PA	17403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128510**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**PHILIP R YATES**

Mailing Address 1260 OAKDALE DRIVE

City	State	Zip Code
YORK	PA	17403

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128512**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5650.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1868 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**S T YATES**

Mailing Address PO BOX 2128

City	State	Zip Code
BLOWING ROCK	NC	28605

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128514**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**EDWARD YAVITZ**

Mailing Address 12375 LEGEND LAKES DRIVE

City	State	Zip Code
ROSCOE	IL	61073

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128516**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**GILBERT YBARRA**

Mailing Address 4149 BYRON ST

City	State	Zip Code
HOUSTON	TX	77005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
YBARRA INVESTMENTS, INC.

Occupation  
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128518**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1869 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BEVERLY YEAGER**

Mailing Address 255 CHERRY LANE

City	State	Zip Code
PALM BEACH	FL	33480

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128519**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BEVERLY YEAGER**

Mailing Address 255 CHERRY LANE

City	State	Zip Code
PALM BEACH	FL	33480

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.128520**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MATTHEW YERKOVICH**

Mailing Address 5636 GOODPASTURE GLEN

City	State	Zip Code
BRADENTON	FL	34211

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
SELF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128522**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

550.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1870 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARY YONTS**

Mailing Address 4970 W. 107TH LOOP

City	State	Zip Code
WESTMINSTER	CO	80031

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128524**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEN F YONTZ**

Mailing Address 4425 N SAWYER RD

City	State	Zip Code
OCONOMOWOC	WI	53066

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128526**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHIJA YOON**

Mailing Address 100 S. PAINTED MOUNTAIN DR.

City	State	Zip Code
LAS VEGAS	NV	89148

FEC ID number of contributing federal political committee.

C

Name of Employer  
CC SPRING VALLEY

Occupation  
CHRISTIAN WORKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

293.00

**Transaction ID : SA17A.128527**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Amount of Each Receipt this Period

150.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3350.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1871 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MARVIN YORK**

Mailing Address **88 HOLLY DR**

City State Zip Code  
**DAWSONVILLE GA 20534**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**203.00**

**Transaction ID : SA17A.128529**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

**203.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**NICOLE YOSS**

Mailing Address **2243 PRAIRIE AVE. SUITE 1**

City State Zip Code  
**BELOIT WI 53511**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128531**

Date of Receipt

**08 / 27 / 2015**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DANIEL YOST**

Mailing Address **982 NEUHAVEN DR**

City State Zip Code  
**ANTIOCH IL 60002**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**EBCG, LLC**

Occupation  
**BENEFIT CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128533**

Date of Receipt

**07 / 13 / 2015**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**953.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1872 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**MAY YOUMANS**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

**Transaction ID : SA17A.114608**

Date of Receipt

**08 / 18 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

50.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALAN J YOUNG**

Mailing Address 1750 BRAESIDE LANE

City

State

Zip Code

**NORTHBROOK**

**IL**

**60062**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128535**

Date of Receipt

**08 / 25 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ALAN J YOUNG**

Mailing Address 1750 BRAESIDE LANE

City

State

Zip Code

**NORTHBROOK**

**IL**

**60062**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128536**

Date of Receipt

**08 / 25 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)** .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1873 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ALISON YOUNG**

Mailing Address 322 LAWRENCE COURT

City	State	Zip Code
PHILADELPHIA	PA	19106

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128538**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CARA YOUNG**

Mailing Address 1750 BRAESIDE LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

**Transaction ID : SA17A.128540**

Date of Receipt

**08 / 25 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CARA YOUNG**

Mailing Address 1750 BRAESIDE LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128541**

Date of Receipt

**08 / 25 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

200.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1874 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRED M YOUNG**

Mailing Address 3201 MICHIGAN BLVD

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128543**

Date of Receipt

**07 / 30 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRED M YOUNG**

Mailing Address 3201 MICHIGAN BLVD

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

**Transaction ID : SA17A.128544**

Date of Receipt

**08 / 19 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRED M YOUNG**

Mailing Address 3201 MICHIGAN BLVD

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128544.0**

Date of Receipt

**08 / 19 / 2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

3700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1875 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SANDRA YOUNG**

Mailing Address 3201 MICHIGAN BLVD

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128544.1**

Date of Receipt

**08 / 19 / 2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JAMES YOUNG**

Mailing Address 100 N. CORPORATE DRIVE - SUITE 100

City	State	Zip Code
BROOKFIELD	WI	53045

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128545**

Date of Receipt

**09 / 11 / 2015**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**KATHRYN YOUNG**

Mailing Address 900 S MEADOWS PKWY #3424

City	State	Zip Code
RENO	NV	89521

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128547**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1876 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROY P YOUNG**

Mailing Address 1120 DOUGLAS BLVD

City	State	Zip Code
ROSEVILLE	CA	95678

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**INSURANCE AGENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128549**

Date of Receipt

**07 / 14 / 2015**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM YOUNG**

Mailing Address 625 COUNTRY CLUB ROAD

City	State	Zip Code
CAMP HILL	PA	17011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128551**

Date of Receipt

**09 / 18 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**W RONALD YOUNGBERG**

Mailing Address 1900 COMBE ROAD

City	State	Zip Code
OGDEN	UT	84403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128553**

Date of Receipt

**09 / 09 / 2015**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1250.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL ZACHARIAS**

Mailing Address 14469 N RIVER RD

City State Zip Code  
HURLEY WI 54534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EXTREME TOOL AND ENGINEERING

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128555**

Date of Receipt

M M / D D / Y Y Y Y  
06 28 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL ZACHARIAS**

Mailing Address 14469 N RIVER RD

City State Zip Code  
HURLEY WI 54534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EXTREME TOOL AND ENGINEERING

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128556**

Date of Receipt

M M / D D / Y Y Y Y  
09 11 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EDWARD ZAJONC**

Mailing Address 1435 VALLE GRANDE

City State Zip Code  
ESCONDIDO CA 92025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
BUSINESS DEVELOPMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

**Transaction ID : SA17A.128558**

Date of Receipt

M M / D D / Y Y Y Y  
07 23 2015

Amount of Each Receipt this Period

220.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

720.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1878 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RICHARD ZAMBONI**

Mailing Address 15714 COLORADO AVE

City	State	Zip Code
PARAMOUNT	CA	90723

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128560**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HUMBERTO ZAMORA**

Mailing Address 18007 WILLOW STREET

City	State	Zip Code
HESPERIA	CA	92345

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128562**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHRISTINE ZANELLO**

Mailing Address 2050 FOREST VIEW AVENUE

City	State	Zip Code
HILLSBOROUGH	CA	94010

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128564**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1750.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1879 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**S. CHRISTINE ZANELLO**

Mailing Address 2050 FOREST VIEW AVENUE

City	State	Zip Code
HILLSBOROUGH	CA	94010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE INVESTMENTS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128566**

Date of Receipt

**06 / 26 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**S. CHRISTINE ZANELLO**

Mailing Address 2050 FOREST VIEW AVENUE

City	State	Zip Code
HILLSBOROUGH	CA	94010

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE INVESTMENTS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1010.00

**Transaction ID : SA17A.128567**

Date of Receipt

**08 / 10 / 2015**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DIANE C ZARAGOZA**

Mailing Address 2309 RIVER GRAND DRIVE

City	State	Zip Code
VESTAVIA HILL	AL	35243

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128569**

Date of Receipt

**08 / 23 / 2015**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2010.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1880 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DENISE ZARINS**

Mailing Address 20746 VERDE VISTA LN

City	State	Zip Code
SARATOGA	CA	95070

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**CONSULTANT - MEDICAL DEVICE INDU**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128571**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ALLEN ZAUG**

Mailing Address 250 N PARK AVENUE

City	State	Zip Code
NEENAH	WI	54956

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128573**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**DEAN & JOANN ZAUMSEIL**

Mailing Address 13515 CAMP WIPIGAKI LANE

City	State	Zip Code
LAC DU FLAMBEAU	WI	54538

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LCO OJIBWA COMMUNITY COLLEGE**

Occupation  
**VP - ADMINISTRATION AND FINANCE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128575**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1881 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JANET A ZEAGER**

Mailing Address 4010 E HARRISBURG PI

City	State	Zip Code
MIDDLETOWN	PA	17057

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : SA17A.128577**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**RICK ZEHETNER**

Mailing Address 212 E. RAVINE DR.

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128579**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CARRIE ZEIDMAN**

Mailing Address 15565 SWISS CREEK LANE

City	State	Zip Code
CUPERTINO	CA	95014

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**ZEIDMAN CONSULTING**

Occupation  
**ARTIST**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128581**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5800.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1882 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**ROBERT ZEIDMAN**

Mailing Address 15565 SWISS CREEK LANE

City	State	Zip Code
CUPERTINO	CA	95014

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ZEIDMAN CONSULTING

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128583**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT ZEIDMAN**

Mailing Address 15565 SWISS CREEK LANE

City	State	Zip Code
CUPERTINO	CA	95014

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ZEIDMAN CONSULTING

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128584**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

CHARGED BACK ON 6/30/2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT ZEIDMAN**

Mailing Address 15565 SWISS CREEK LANE

City	State	Zip Code
CUPERTINO	CA	95014

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ZEIDMAN CONSULTING

Occupation  
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.129147**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

CHARGEBACK

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1883 / 2740

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**RONALD ZELLMER**

Mailing Address 607B HICKORY HOLLOW ROAD

City	State	Zip Code
WATERFORD	WI	53185

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128586**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ZACH ZHANG**

Mailing Address 465 PARKCHESTER ROAD

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing federal political committee.

C

Name of Employer  
LEYARD AMERICAN CORP

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128588**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**QUAN ZHOU**

Mailing Address 105 LYMAN RD

City	State	Zip Code
CHESTNUT HILL	MA	02467

FEC ID number of contributing federal political committee.

C

Name of Employer  
IDG

Occupation  
MANAGER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128590**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4700.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1884 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**JASON ZIEGLER**

Mailing Address 10552 OAKMONT WAY

City	State	Zip Code
CONCORD TOWNSHIP	OH	44077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128592**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KEITH ZIEGLER**

Mailing Address 10552 OAKMONT WAY

City	State	Zip Code
CONCORD TOWNS	OH	44077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CLEVELAND CONSTRUCTION INC.

Occupation  
SENIOR VICE PRESIDENT OF CONSTRU

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128594**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			10			2015			

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMY ZIETLOW**

Mailing Address N2446 THREE TOWN ROAD

City	State	Zip Code
LA CROSSE	WI	54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KWIK TRIP

Occupation  
VP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128596**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			10			2015			

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2000.00

**Total This Period** (last page this line number only) .....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DONALD P ZIETLOW**

Mailing Address 2122 OAK ST

City	State	Zip Code
LA CROSSE	WI	54603

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KWIK TRIP, INC.

Occupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128598**

Date of Receipt

**06** / **25** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**HANS K ZIETLOW**

Mailing Address 1830 ALPINE PL

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KWIK TRIP

Occupation  
DIRECTOR OF REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.128600**

Date of Receipt

**07** / **09** / **2015**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**JILL S ZIETLOW**

Mailing Address 1301 7TH ST SW

City	State	Zip Code
ROCHESTER	MN	55902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
MAYO CLINIC

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128602**

Date of Receipt

**07** / **08** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1500.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1886 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LA VONNE ZIETLOW**

Mailing Address 2802 BERGAMOT PL

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KWIK TRIP

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128604**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**LA VONNE ZIETLOW**

Mailing Address 2802 BERGAMOT PL

City	State	Zip Code
ONALASKA	WI	54650

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KWIK TRIP

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128605**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**MARK ZIETLOW**

Mailing Address 1301 7TH ST SW

City	State	Zip Code
ROCHESTER	MN	55902

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
KWIK TRIP

Occupation  
COPORATE INTERN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

**Transaction ID : SA17A.128607**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6900.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT ZIETLOW**

Mailing Address 1301 7TH ST SW

City	State	Zip Code
ROCHESTER	MN	55902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MAYO CLINIC

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128609**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT ZIETLOW**

Mailing Address 1301 7TH ST SW

City	State	Zip Code
ROCHESTER	MN	55902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MAYO CLINIC

Occupation  
DOCTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128610**

Date of Receipt

**07** / **08** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STEVEN ZIETLOW**

Mailing Address N2448 THREE TOWN RD

City	State	Zip Code
LA CROSSE	WI	54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KWIK TRIP

Occupation  
VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128612**

Date of Receipt

**07** / **10** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

10800.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1888 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**STEVEN ZIETLOW**

Mailing Address **N2448 THREE TOWN RD**

City <b>LA CROSSE</b>	State <b>WI</b>	Zip Code <b>54601</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**KWIK TRIP**

Occupation  
**VICE PRESIDENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128613**

Date of Receipt

M M / D D / Y Y Y Y
07 / 10 / 2015

SEE REATTRIBUTION

Amount of Each Receipt this Period

**-2700.00**

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**JOHN ZILLMER**

Mailing Address **30 BASSETT HUNT LANE**

City <b>GLENMOORE</b>	State <b>PA</b>	Zip Code <b>19343</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ECL, RAI, VRTV**

Occupation  
**CORPORATE BOARD DIRECTOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2700.00**

**Transaction ID : SA17A.128615**

Date of Receipt

M M / D D / Y Y Y Y
06 / 18 / 2015

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LINDA S ZIMBAL**

Mailing Address **6020 WILSON LIMA RD**

City <b>OOSTBURG</b>	State <b>WI</b>	Zip Code <b>53070</b>
-------------------------	--------------------	--------------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ZIMBAL MINKERY**

Occupation  
**MINK FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**398.00**

**Transaction ID : SA17A.128616**

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Receipt this Period

**199.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**2899.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**DAN ZIMMERMAN**

Mailing Address **W10634 STATE ROAD 23**

City	State	Zip Code
ROSENDALE	WI	54974

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF-EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17A.128618**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			11			2015			

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KAREN R ZIMMERMAN**

Mailing Address **16 N VINCENNES CIRCLE**

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17A.128620**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			11			2015			

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT ZIMMERMAN**

Mailing Address **942 FRANKLIN AVE**

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**WEST SUBURBAN UROLOGY**

Occupation  
**M.D.**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17A.128622**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			20			2015			

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

**1750.00**

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**WALTER S ZIMOLONG**

Mailing Address 915 CARPENTER ST

City	State	Zip Code
PHILADELPHIA	PA	19147

FEC ID number of contributing federal political committee.

C

Name of Employer  
ZIMOLONG LLC

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128624**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MARJORIE J ZISKOVSKY**

Mailing Address 109 SOUTH BROADWAY STRE

City	State	Zip Code
TOLEDO	IA	52342

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128626**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**TED ZOOK**

Mailing Address 745 LOCUST ST.

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer  
KIRKLAND & ELLIS LLP

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128628**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2000.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BARBARA ZORICH**

Mailing Address 1100 LOUISIANA #4900

City	State	Zip Code
HOUSTON	TX	77002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128630**

Date of Receipt

**09** / **10** / **2015**

REATTRIBUTED

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ROBERT ZORICH**

Mailing Address 1100 LOUISIANA #4900

City	State	Zip Code
HOUSTON	TX	77002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

**Transaction ID : SA17A.128632**

Date of Receipt

**09** / **10** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**ROBERT ZORICH**

Mailing Address 1100 LOUISIANA #4900

City	State	Zip Code
HOUSTON	TX	77002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128633**

Date of Receipt

**09** / **10** / **2015**

SEE REATTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1892 / 2740

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**JAMES R ZOROMSKI**

Mailing Address 1908 CTY ROAD K NORTH

City	State	Zip Code
CUSTER	WI	54423

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17A.128635**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**BRUNO ZULPO**

Mailing Address 14875 REYNAUD DRIVE

City	State	Zip Code
SAN JOSE	CA	95127

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128637**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**LAURENCE ZURIFF**

Mailing Address 1172 PARK AVENUE

City	State	Zip Code
NEW YORK	NY	10128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17A.128639**

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....



# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**KEVIN ZWANZIGER**

Mailing Address 3005 DURHAM AVENUE

City NASHUA	State IA	Zip Code 50658
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NASHUA WELDING & REPAIR

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17A.128641**

Date of Receipt

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN ZWANZIGER**

Mailing Address 3005 DURHAM AVENUE

City NASHUA	State IA	Zip Code 50658
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NASHUA WELDING & REPAIR

Occupation  
OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.128642**

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Receipt this Period

200.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**THOMAS ZYLSTRA**

Mailing Address 5162 190TH ST

City SIBLEY	State IA	Zip Code 51249
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17A.128644**

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

750.00

**Total This Period (last page this line number only)**.....

4699491.54

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**BUILDING LEADERSHIP AND INSPIRING NEW ENTERPRISE PAC**

Mailing Address P. O. BOX 96

City	State	Zip Code
ST. ELIZABETH	MO	65075

FEC ID number of contributing  
federal political committee.

**C** C00489427

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17C.128646**

Date of Receipt

MM / DD / YYYY  
07 / 29 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**CEMEX INC. EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 929 GESSNER RD., SUITE 1900

City	State	Zip Code
HOUSTON	TX	77024

FEC ID number of contributing  
federal political committee.

**C** C00111880

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17C.128648**

Date of Receipt

MM / DD / YYYY  
08 / 25 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CITIZENS FOR JOE SOSNOWSKI**

Mailing Address 6153 MUIRFIELD LANE

City	State	Zip Code
ROCKFORD	IL	61114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17C.128650**

Date of Receipt

MM / DD / YYYY  
08 / 20 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

4200.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**COMMITTEE TO ELECT MICHAEL STOPA; THE**

Mailing Address 38 WESTFIELD DRIVE

City	State	Zip Code
HOLLISTON	MA	01746

FEC ID number of contributing federal political committee.

**C** C00486159

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17C.128652**

Date of Receipt

MM / DD / YYYY  
08 / 10 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 600 CORPORATE PARK DRIVE

City	State	Zip Code
ST. LOUIS	MO	63105

FEC ID number of contributing federal political committee.

**C** C00219642

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17C.128654**

Date of Receipt

MM / DD / YYYY  
07 / 29 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**FRIENDS OF ALBERTA DARLING**

Mailing Address 1428 NORIDGE TRAIL

City	State	Zip Code
PORT WASHINGTON	WI	53074

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17C.128656**

Date of Receipt

MM / DD / YYYY  
09 / 08 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**FRIENDS OF DOUG EVERETT**

Mailing Address 24105 PLANTATION DRIVE NE

City	State	Zip Code
ATLANTA	GA	30324

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17C.128658**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	19	/	2015

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**FRIENDS TO ELECT DAVID FAULKNER**

Mailing Address 4163 APPOMATTOX LANE

City	State	Zip Code
BIRMINGHAM	AL	35213

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17C.128660**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	25	/	2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**INTERNATIONAL BANK OF COMMERCE COMMITTEE FOR IMPROVEMENT AND BETTERMENT OF THE COUNTRY**

Mailing Address 1200 SAN BERNARDO

City	State	Zip Code
LAREDO	TX	78040

FEC ID number of contributing federal political committee.

**C** C00276592

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17C.128662**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	07	/	2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

6250.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**LONGHORN PAC**

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing  
federal political committee.

**C** C00402602

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17C.128664**

Date of Receipt

**M M / D D / Y Y Y Y**  
09 / 07 / 2015

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**MILWAUKEE POLICE ASSOCIATION PAC**

Mailing Address 6310 WEST BLUEMOUND ROAD

City

MILWAUKEE

State

WI

Zip Code

53213

FEC ID number of contributing  
federal political committee.

**C** C00324673

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17C.128666**

Date of Receipt

**M M / D D / Y Y Y Y**  
07 / 14 / 2015

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**NATIONAL TANK TRUCK CARRIERS INC POLITICAL ACTION COMMITTEE**

Mailing Address 950 NORTH GLEBE RD STE 520

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

**C** C00188011

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

**Transaction ID : SA17C.128668**

Date of Receipt

**M M / D D / Y Y Y Y**  
07 / 06 / 2015

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

9700.00

**Total This Period** (last page this line number only) .....

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 1898 / 2740

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A. Full Name (Last, First, Middle Initial)**

**SCHEIDER NATIONAL, INC. TRANSPAC**

Mailing Address 3101 S PACKERLAND DRIVE  
PO BOX 1475

City GREEN BAY State WI Zip Code 54305

FEC ID number of contributing  
federal political committee.

**C** C00563924

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17C.128670**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2015

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1000.00

**Total This Period** (last page this line number only) .....

23400.00

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

**A.** Full Name (Last, First, Middle Initial)  
**TOWN OF PETERBOROUGH**

Mailing Address **1 GROVE STREET**

City State Zip Code  
**PETERBOROUGH NH 03458**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1540.00**

**Transaction ID : SA20A.128671**

Date of Receipt

**09 / 21 / 2015**

**VENDOR REFUND**

Amount of Each Receipt this Period

**1540.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**1540.00**

**Total This Period** (last page this line number only) .....

**1540.00**

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ACE PARKING**

Mailing Address **645 ASH STREET**

City  
**SAN DIEGO**

State  
**CA**

Zip Code  
**92101**

Purpose of Disbursement  
**EVENT SERVICES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.4132**

Amount of Each Disbursement this Period

560.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ACS SOUND & LIGHTING**

Mailing Address **110 LOTT COURT**

City  
**WEST COLUMBIA**

State  
**SC**

Zip Code  
**29169**

Purpose of Disbursement  
**AUDIO VISUAL SERVICES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.4134**

Amount of Each Disbursement this Period

3108.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL PHILIP ADAM**

Mailing Address **1802 PANKRATZ STREET**

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6245**

Amount of Each Disbursement this Period

1809.02

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3668.35

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL PHILIP ADAM**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6246**

Amount of Each Disbursement this Period

1984.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MICHAEL PHILIP ADAM**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6247**

Amount of Each Disbursement this Period

1994.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL PHILIP ADAM**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6248**

Amount of Each Disbursement this Period

2181.82

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL PHILIP ADAM**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6249**

Amount of Each Disbursement this Period

2796.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MICHAEL PHILIP ADAM**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6250**

Amount of Each Disbursement this Period

2181.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL PHILIP ADAM**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6251**

Amount of Each Disbursement this Period

1031.78

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BEN ADAMS**

Mailing Address 77 H STREET NW #162

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
ADAMS 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6253

Amount of Each Disbursement this Period

29.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BEN ADAMS**

Mailing Address 77 H STREET NW #162

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
ADAMS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6254

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BEN ADAMS**

Mailing Address 77 H STREET NW #162

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
ADAMS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6255

Amount of Each Disbursement this Period

12.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BEN ADAMS**

Mailing Address 77 H STREET NW #162

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.6893

Amount of Each Disbursement this Period

462.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ADESYS CONSULTING LLC**

Mailing Address 2965 CAHILL MAIN

City  
FITCHBURG

State  
WI

Zip Code  
53711

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4136

Amount of Each Disbursement this Period

5772.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ADVANTAGE INC.**

Mailing Address 2300 CLARENDON BLVD #303

City  
ARLINGTON

State  
VA

Zip Code  
22201

Purpose of Disbursement  
INTERNET/TELEPHONE SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4140

Amount of Each Disbursement this Period

1056.56

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

7290.88

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ADVENTURE RENTALS & LEASING LLC**

Mailing Address 5120 N BRADY ST (HIGHWAY 61)

City DAVENPORT State IA Zip Code 52806

Purpose of Disbursement  
TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

**Transaction ID : SB23.4142**

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ADVENTURE RENTALS & LEASING LLC**

Mailing Address 5120 N BRADY ST (HIGHWAY 61)

City DAVENPORT State IA Zip Code 52806

Purpose of Disbursement  
TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

**Transaction ID : SB23.4143**

Amount of Each Disbursement this Period

13108.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ADVENTURE RENTALS & LEASING LLC**

Mailing Address 5120 N BRADY ST (HIGHWAY 61)

City DAVENPORT State IA Zip Code 52806

Purpose of Disbursement  
TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4144**

Amount of Each Disbursement this Period

7563.28

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

60672.25

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ADVENTURE RENTALS & LEASING LLC**

Mailing Address 5120 N BRADY ST (HIGHWAY 61)

City  
DAVENPORT

State  
IA

Zip Code  
52806

Purpose of Disbursement  
TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

**Transaction ID : SB23.4145**

Amount of Each Disbursement this Period

13108.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AIR CHARTER TEAM**

Mailing Address 4151 N MULBERRY DRIVE #250

City  
KANSAS CITY

State  
MO

Zip Code  
64116

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

**Transaction ID : SB23.4147**

Amount of Each Disbursement this Period

6100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AIR CHARTER TEAM**

Mailing Address 4151 N MULBERRY DRIVE #250

City  
KANSAS CITY

State  
MO

Zip Code  
64116

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2015

**Transaction ID : SB23.4148**

Amount of Each Disbursement this Period

8100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

27308.97

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALASKA AIRLINES**

Mailing Address 19300 INTERNATIONAL BLVD

City SEATTLE State WA Zip Code 98188

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 09 / 2015

**Transaction ID : SB23.4150**

Amount of Each Disbursement this Period

134.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALASKA AIRLINES**

Mailing Address 19300 INTERNATIONAL BLVD

City SEATTLE State WA Zip Code 98188

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 09 / 2015

**Transaction ID : SB23.4151**

Amount of Each Disbursement this Period

134.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALASKA AIRLINES**

Mailing Address 19300 INTERNATIONAL BLVD

City SEATTLE State WA Zip Code 98188

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 09 / 2015

**Transaction ID : SB23.4152**

Amount of Each Disbursement this Period

134.10

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALASKA AIRLINES**

Mailing Address 19300 INTERNATIONAL BLVD

City SEATTLE State WA Zip Code 98188

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 09 / 2015

**Transaction ID : SB23.4153**

Amount of Each Disbursement this Period

134.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DEIDRE A ALMSTEAD**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6257**

Amount of Each Disbursement this Period

3715.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DEIDRE A ALMSTEAD**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6258**

Amount of Each Disbursement this Period

5440.95

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DEIDRE A ALMSTEAD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6259**

Amount of Each Disbursement this Period

5243.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DEIDRE A ALMSTEAD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6260**

Amount of Each Disbursement this Period

5139.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DEIDRE A ALMSTEAD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6261**

Amount of Each Disbursement this Period

4954.98

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DEIDRE A ALMSTEAD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6262

Amount of Each Disbursement this Period

2289.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALON 7-ELEVEN**

Mailing Address 3200 N. GARFIELD S, MIDLAND, TX

City State Zip Code  
MIDLAND TX 79705

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

Transaction ID : SB23.4155

Amount of Each Disbursement this Period

14.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW G ALONSOZANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6264

Amount of Each Disbursement this Period

2431.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW G ALONSOZANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6265

Amount of Each Disbursement this Period

2460.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW G ALONSOZANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6266

Amount of Each Disbursement this Period

2450.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW G ALONSOZANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6267

Amount of Each Disbursement this Period

1132.77

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALPHAGRAPHICS**

Mailing Address 1017 W WASHINGTON BOULEVARD #101

City CHICAGO State IL Zip Code 60607

Purpose of Disbursement  
PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.4157

Amount of Each Disbursement this Period

339.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMAZON**

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4166

Amount of Each Disbursement this Period

1718.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMAZON**

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 17 / 2015

Transaction ID : SB23.4176

Amount of Each Disbursement this Period

7.48

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

339.01

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMAZON**

Mailing Address 410 TERRY AVE N

City  
**SEATTLE**

State  
**WA**

Zip Code  
**98109**

Purpose of Disbursement  
**AMEX 08/19 PMT: OFFICE SUPPLIES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.4164**

Amount of Each Disbursement this Period

152.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMAZON**

Mailing Address 410 TERRY AVE N

City  
**SEATTLE**

State  
**WA**

Zip Code  
**98109**

Purpose of Disbursement  
**AMEX 08/19 PMT: OFFICE SUPPLIES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.4165**

Amount of Each Disbursement this Period

175.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMAZON**

Mailing Address 410 TERRY AVE N

City  
**SEATTLE**

State  
**WA**

Zip Code  
**98109**

Purpose of Disbursement  
**BOLDING 09/24 REIMBURSEMENT: ONLINE ADVERTISING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

**Transaction ID : SB23.4177**

Amount of Each Disbursement this Period

5087.83

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.4178

Amount of Each Disbursement this Period

20914.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4167

Amount of Each Disbursement this Period

16.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4168

Amount of Each Disbursement this Period

83.91

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
WETZEL 09/09 REIMBURSEMENT: OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4174

Amount of Each Disbursement this Period

22.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.4169

Amount of Each Disbursement this Period

129.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.4170

Amount of Each Disbursement this Period

474.72

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4171

Amount of Each Disbursement this Period

9.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4172

Amount of Each Disbursement this Period

4.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4173

Amount of Each Disbursement this Period

48.78

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMAZON**

Mailing Address 410 TERRY AVE N

City State Zip Code  
SEATTLE WA 98109

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

Transaction ID : SB23.4179

Amount of Each Disbursement this Period

16576.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMEN STREET FISH & RAW BAR**

Mailing Address 205 EAST BAY STREET

City State Zip Code  
CHARLESTON SC 29401

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4181

Amount of Each Disbursement this Period

200.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

Transaction ID : SB23.4183

Amount of Each Disbursement this Period

466.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

**Transaction ID : SB23.4184**

Amount of Each Disbursement this Period

252.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

**Transaction ID : SB23.4185**

Amount of Each Disbursement this Period

205.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

**Transaction ID : SB23.4186**

Amount of Each Disbursement this Period

312.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.4187

Amount of Each Disbursement this Period

312.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.4188

Amount of Each Disbursement this Period

312.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.4189

Amount of Each Disbursement this Period

312.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.4190**

Amount of Each Disbursement this Period

66.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.4191**

Amount of Each Disbursement this Period

66.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.4192**

Amount of Each Disbursement this Period

66.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.4193

Amount of Each Disbursement this Period

387.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.4194

Amount of Each Disbursement this Period

387.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.4195

Amount of Each Disbursement this Period

387.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.4255**

Amount of Each Disbursement this Period

272.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4196**

Amount of Each Disbursement this Period

18.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4197**

Amount of Each Disbursement this Period

568.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SB23.4198**

Amount of Each Disbursement this Period

618.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SB23.4205**

Amount of Each Disbursement this Period

77.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SB23.4206**

Amount of Each Disbursement this Period

80.93

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4207

Amount of Each Disbursement this Period

80.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4208

Amount of Each Disbursement this Period

374.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4209

Amount of Each Disbursement this Period

429.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4210

Amount of Each Disbursement this Period

80.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4211

Amount of Each Disbursement this Period

429.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4212

Amount of Each Disbursement this Period

429.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4213

Amount of Each Disbursement this Period

374.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4214

Amount of Each Disbursement this Period

77.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4250

Amount of Each Disbursement this Period

183.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4199

Amount of Each Disbursement this Period

389.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4200

Amount of Each Disbursement this Period

474.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4215

Amount of Each Disbursement this Period

285.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4201

Amount of Each Disbursement this Period

240.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4202

Amount of Each Disbursement this Period

268.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4216

Amount of Each Disbursement this Period

649.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4251

Amount of Each Disbursement this Period

557.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

Transaction ID : SB23.4217

Amount of Each Disbursement this Period

206.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.4259

Amount of Each Disbursement this Period

4.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4218**

Amount of Each Disbursement this Period

580.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4219**

Amount of Each Disbursement this Period

57.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4220**

Amount of Each Disbursement this Period

580.50

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4221

Amount of Each Disbursement this Period

28.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4222

Amount of Each Disbursement this Period

28.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4223

Amount of Each Disbursement this Period

57.87

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4224**

Amount of Each Disbursement this Period

580.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4225**

Amount of Each Disbursement this Period

60.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4226**

Amount of Each Disbursement this Period

28.94

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4227

Amount of Each Disbursement this Period

580.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4228

Amount of Each Disbursement this Period

580.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4229

Amount of Each Disbursement this Period

580.50

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.4252**

Amount of Each Disbursement this Period

571.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.4203**

Amount of Each Disbursement this Period

44.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.4204**

Amount of Each Disbursement this Period

580.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.4254**

Amount of Each Disbursement this Period

238.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

**Transaction ID : SB23.4256**

Amount of Each Disbursement this Period

352.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.4260**

Amount of Each Disbursement this Period

76.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

**Transaction ID : SB23.4230**

Amount of Each Disbursement this Period

556.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

**Transaction ID : SB23.4231**

Amount of Each Disbursement this Period

354.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

**Transaction ID : SB23.4257**

Amount of Each Disbursement this Period

560.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4232**

Amount of Each Disbursement this Period

568.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.4233**

Amount of Each Disbursement this Period

317.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4234**

Amount of Each Disbursement this Period

27.92

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4235**

Amount of Each Disbursement this Period

46.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4236**

Amount of Each Disbursement this Period

366.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4237**

Amount of Each Disbursement this Period

696.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4238

Amount of Each Disbursement this Period

27.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4239

Amount of Each Disbursement this Period

46.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4240

Amount of Each Disbursement this Period

366.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4241

Amount of Each Disbursement this Period

696.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4242

Amount of Each Disbursement this Period

27.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4243

Amount of Each Disbursement this Period

50.38

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4244**

Amount of Each Disbursement this Period

366.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4245**

Amount of Each Disbursement this Period

912.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4246**

Amount of Each Disbursement this Period

27.92

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4247

Amount of Each Disbursement this Period

46.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4248

Amount of Each Disbursement this Period

366.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4249

Amount of Each Disbursement this Period

561.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
GALLATIN 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.4253**

Amount of Each Disbursement this Period

218.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
O'DRISCOLL 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

**Transaction ID : SB23.4258**

Amount of Each Disbursement this Period

276.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN BURGER**

Mailing Address 5821 FAIRVIEW ROAD

City State Zip Code  
CHARLOTTE NC 28209

Purpose of Disbursement  
NEITZEL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

**Transaction ID : SB23.4262**

Amount of Each Disbursement this Period

13.39

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

City State Zip Code  
NEW YORK NY 10285

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4264**

Amount of Each Disbursement this Period

12425.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

City State Zip Code  
NEW YORK NY 10285

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4265**

Amount of Each Disbursement this Period

24421.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMERICAN LEGION POST 34**

Mailing Address PO BOX 2745

City State Zip Code  
ROCK HILL SC 29732

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4269**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

37246.70

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AM SOLUTIONS**

Mailing Address 100 INTERSTATE BLVD

City  
EDGERTON

State  
WI

Zip Code  
53534

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4161

Amount of Each Disbursement this Period

5316.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AM SOLUTIONS**

Mailing Address 100 INTERSTATE BLVD

City  
EDGERTON

State  
WI

Zip Code  
53534

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4162

Amount of Each Disbursement this Period

13493.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City  
WASHINGTON, DC

State  
DC

Zip Code  
20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 04 / 2015

Transaction ID : SB23.4271

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

18809.30

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 04 / 2015

**Transaction ID : SB23.4272**

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 05 / 2015

**Transaction ID : SB23.4273**

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 05 / 2015

**Transaction ID : SB23.4274**

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

**Transaction ID : SB23.4275**

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 11 / 2015

**Transaction ID : SB23.4276**

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 15 / 2015

**Transaction ID : SB23.4277**

Amount of Each Disbursement this Period

104.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City State Zip Code  
WASHINGTON, DC DC 20002

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4278**

Amount of Each Disbursement this Period

476.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City State Zip Code  
WASHINGTON, DC DC 20002

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SB23.4279**

Amount of Each Disbursement this Period

74.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City State Zip Code  
WASHINGTON, DC DC 20002

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SB23.4282**

Amount of Each Disbursement this Period

116.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.4283**

Amount of Each Disbursement this Period

104.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

**Transaction ID : SB23.4280**

Amount of Each Disbursement this Period

330.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE. NE

City WASHINGTON, DC State DC Zip Code 20002

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4281**

Amount of Each Disbursement this Period

-53.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANSAY & ASSOCIATES**

Mailing Address 101 E GRAND AVE #11

City  
**PORT WASHINGTON**

State  
**WI**

Zip Code  
**53074**

Purpose of Disbursement  
**INSURANCE**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4285**

Amount of Each Disbursement this Period

3322.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. APPLE**

Mailing Address APPLE CAMPUS

City  
**CUPERTINO**

State  
**CA**

Zip Code  
**95014**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 08/19 PMT: COMPUTER PURCHASE**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

**Transaction ID : SB23.4287**

Amount of Each Disbursement this Period

948.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALEXA M ARDIS**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6269**

Amount of Each Disbursement this Period

694.51

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

3322.60

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALEXA M ARDIS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6270**

Amount of Each Disbursement this Period

833.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALEXA M ARDIS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6271**

Amount of Each Disbursement this Period

838.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ARENA COMMUNICATIONS**

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4290**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

8000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ARENA COMMUNICATIONS**

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement  
CAMPAIGN PROMOTIONAL ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4289**

Amount of Each Disbursement this Period

33287.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ARI FLEISCHER COMMUNICATIONS INC.**

Mailing Address PO BOX 115

City POUND RIDGE State NY Zip Code 10576

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4292**

Amount of Each Disbursement this Period

1235.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASCAP**

Mailing Address 1900 BROADWAY

City NEW YORK State NY Zip Code 10023

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: MUSIC LICENSING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

**Transaction ID : SB23.4294**

Amount of Each Disbursement this Period

3500.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

34523.38

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASPECT CONSULTING LLC**

Mailing Address 8401 EXCELSIOR DRIVE #103

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4296**

Amount of Each Disbursement this Period

5372.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ASPECT CONSULTING LLC**

Mailing Address 8401 EXCELSIOR DRIVE #103

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4297**

Amount of Each Disbursement this Period

36293.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASPECT CONSULTING LLC**

Mailing Address 8401 EXCELSIOR DRIVE #103

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4298**

Amount of Each Disbursement this Period

2508.68

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

44174.78

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ATLANTA PRO AV LLC**

Mailing Address 1222 LOGAN CIRCLE NW

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4302

Amount of Each Disbursement this Period

1816.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ATLASSIAN PTY LTD**

Mailing Address 341 GEORGE ST, SYDNEY NSW 2000, AU

City SYDNEY State AL Zip Code

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 29 / 2015

Transaction ID : SB23.4306

Amount of Each Disbursement this Period

30.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ATLASSIAN PTY LTD**

Mailing Address 341 GEORGE ST, SYDNEY NSW 2000, AU

City SYDNEY State AL Zip Code

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4307

Amount of Each Disbursement this Period

250.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

1816.84

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ATLISSIAN PTY LTD**

Mailing Address 341 GEORGE ST, SYDNEY NSW 2000, AU

City SYDNEY State AL Zip Code

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4308**

Amount of Each Disbursement this Period

210.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ATLAS STRATEGY GROUP LLC**

Mailing Address 16 LOREN WOODS

City ST LOUIS State MO Zip Code 63124

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4304**

Amount of Each Disbursement this Period

14520.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AUDIO VISUAL ADVISORS INC**

Mailing Address 3595 E PATRICK LANE #700

City LAS VEGAS State NV Zip Code 89120

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4310**

Amount of Each Disbursement this Period

7990.75

☐ Memo Item

**Subtotal Of Receipts This Page** (optional)..... 22511.07

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIATION ADVISOR INC.**

Mailing Address PO BOX 600

City  
**ANTIOCH**

State  
**IL**

Zip Code  
**60002**

Purpose of Disbursement  
**TRAVEL: AIR**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SB23.4313**

Amount of Each Disbursement this Period

6462.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIATION ADVISOR INC.**

Mailing Address PO BOX 600

City  
**ANTIOCH**

State  
**IL**

Zip Code  
**60002**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

**Transaction ID : SB23.4312**

Amount of Each Disbursement this Period

21.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City  
**PARSIPPANY-TROY HILLS**

State  
**NJ**

Zip Code  
**07054**

Purpose of Disbursement  
**AMEX 07/22 PMT: TRAVEL: CAR RENTAL**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 20 / 2015

**Transaction ID : SB23.4316**

Amount of Each Disbursement this Period

231.44

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

6462.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City PARSIPPANY-TROY HILLS State NJ Zip Code 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 21 / 2015

**Transaction ID : SB23.4317**

Amount of Each Disbursement this Period

413.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City PARSIPPANY-TROY HILLS State NJ Zip Code 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SB23.4318**

Amount of Each Disbursement this Period

546.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City PARSIPPANY-TROY HILLS State NJ Zip Code 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 23 / 2015

**Transaction ID : SB23.4319**

Amount of Each Disbursement this Period

183.04

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 23 / 2015

**Transaction ID : SB23.4320**

Amount of Each Disbursement this Period

485.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 23 / 2015

**Transaction ID : SB23.4321**

Amount of Each Disbursement this Period

538.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 24 / 2015

**Transaction ID : SB23.4322**

Amount of Each Disbursement this Period

422.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

Transaction ID : SB23.4323

Amount of Each Disbursement this Period

242.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

Transaction ID : SB23.4324

Amount of Each Disbursement this Period

527.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

Transaction ID : SB23.4325

Amount of Each Disbursement this Period

529.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

Transaction ID : SB23.4443

Amount of Each Disbursement this Period

398.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB23.4444

Amount of Each Disbursement this Period

420.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

Transaction ID : SB23.4445

Amount of Each Disbursement this Period

90.43

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
ADAMS 08/07 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4315

Amount of Each Disbursement this Period

179.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4326

Amount of Each Disbursement this Period

105.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4327

Amount of Each Disbursement this Period

234.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4328

Amount of Each Disbursement this Period

309.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4329

Amount of Each Disbursement this Period

381.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4330

Amount of Each Disbursement this Period

237.73

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4331

Amount of Each Disbursement this Period

307.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4332

Amount of Each Disbursement this Period

574.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4333

Amount of Each Disbursement this Period

574.71

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4334

Amount of Each Disbursement this Period

574.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4335

Amount of Each Disbursement this Period

574.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4336

Amount of Each Disbursement this Period

307.26

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4337

Amount of Each Disbursement this Period

-172.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4338

Amount of Each Disbursement this Period

327.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4339

Amount of Each Disbursement this Period

283.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4340

Amount of Each Disbursement this Period

583.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4341

Amount of Each Disbursement this Period

517.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4342

Amount of Each Disbursement this Period

257.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4343

Amount of Each Disbursement this Period

229.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4344

Amount of Each Disbursement this Period

172.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4345

Amount of Each Disbursement this Period

262.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4346**

Amount of Each Disbursement this Period

476.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4347**

Amount of Each Disbursement this Period

485.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4348**

Amount of Each Disbursement this Period

233.32

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4349**

Amount of Each Disbursement this Period

159.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SB23.4350**

Amount of Each Disbursement this Period

60.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SB23.4351**

Amount of Each Disbursement this Period

667.03

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4352

Amount of Each Disbursement this Period

813.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4353

Amount of Each Disbursement this Period

622.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4354

Amount of Each Disbursement this Period

193.75

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4355

Amount of Each Disbursement this Period

635.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4356

Amount of Each Disbursement this Period

575.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4357

Amount of Each Disbursement this Period

349.12

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SB23.4358**

Amount of Each Disbursement this Period

309.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SB23.4359**

Amount of Each Disbursement this Period

1531.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4360**

Amount of Each Disbursement this Period

1066.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4361

Amount of Each Disbursement this Period

372.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4362

Amount of Each Disbursement this Period

408.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4363

Amount of Each Disbursement this Period

313.46

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4364

Amount of Each Disbursement this Period

267.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4365

Amount of Each Disbursement this Period

17.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4366

Amount of Each Disbursement this Period

293.03

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4367

Amount of Each Disbursement this Period

442.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4368

Amount of Each Disbursement this Period

574.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4369

Amount of Each Disbursement this Period

600.67

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4370

Amount of Each Disbursement this Period

134.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4371

Amount of Each Disbursement this Period

286.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4372

Amount of Each Disbursement this Period

380.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4373

Amount of Each Disbursement this Period

515.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4374

Amount of Each Disbursement this Period

-134.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4375

Amount of Each Disbursement this Period

324.51

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4376

Amount of Each Disbursement this Period

25.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4377

Amount of Each Disbursement this Period

175.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4378

Amount of Each Disbursement this Period

494.02

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4379

Amount of Each Disbursement this Period

15.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4380

Amount of Each Disbursement this Period

22.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4381

Amount of Each Disbursement this Period

158.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.4382**

Amount of Each Disbursement this Period

159.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.4383**

Amount of Each Disbursement this Period

590.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

**Transaction ID : SB23.4384**

Amount of Each Disbursement this Period

11.70

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4385

Amount of Each Disbursement this Period

1913.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4386

Amount of Each Disbursement this Period

1913.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4387

Amount of Each Disbursement this Period

23.35

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4388

Amount of Each Disbursement this Period

24.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4389

Amount of Each Disbursement this Period

277.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4390

Amount of Each Disbursement this Period

300.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4391

Amount of Each Disbursement this Period

361.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4392

Amount of Each Disbursement this Period

632.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 02 / 2015

Transaction ID : SB23.4393

Amount of Each Disbursement this Period

5.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 02 / 2015

**Transaction ID : SB23.4394**

Amount of Each Disbursement this Period

19.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

**Transaction ID : SB23.4395**

Amount of Each Disbursement this Period

85.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

**Transaction ID : SB23.4396**

Amount of Each Disbursement this Period

238.91

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4397

Amount of Each Disbursement this Period

258.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4398

Amount of Each Disbursement this Period

291.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4399

Amount of Each Disbursement this Period

328.91

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4400

Amount of Each Disbursement this Period

95.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4401

Amount of Each Disbursement this Period

165.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4402

Amount of Each Disbursement this Period

231.19

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 07 2015

Transaction ID : SB23.4403

Amount of Each Disbursement this Period

231.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 07 2015

Transaction ID : SB23.4404

Amount of Each Disbursement this Period

238.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 07 2015

Transaction ID : SB23.4405

Amount of Each Disbursement this Period

358.40

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4406**

Amount of Each Disbursement this Period

393.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4407**

Amount of Each Disbursement this Period

594.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4408**

Amount of Each Disbursement this Period

0.75

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4409**

Amount of Each Disbursement this Period

12.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4410**

Amount of Each Disbursement this Period

17.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4411**

Amount of Each Disbursement this Period

19.85

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4412**

Amount of Each Disbursement this Period

196.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4413**

Amount of Each Disbursement this Period

206.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.4447**

Amount of Each Disbursement this Period

174.04

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.4414**

Amount of Each Disbursement this Period

200.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.4415**

Amount of Each Disbursement this Period

306.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.4416**

Amount of Each Disbursement this Period

656.11

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

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Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.4417

Amount of Each Disbursement this Period

663.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4418

Amount of Each Disbursement this Period

73.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 15 / 2015

Transaction ID : SB23.4419

Amount of Each Disbursement this Period

151.49

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.4420

Amount of Each Disbursement this Period

100.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.4421

Amount of Each Disbursement this Period

100.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.4422

Amount of Each Disbursement this Period

549.64

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4423

Amount of Each Disbursement this Period

249.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4424

Amount of Each Disbursement this Period

537.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4425

Amount of Each Disbursement this Period

640.38

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4426**

Amount of Each Disbursement this Period

266.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

**Transaction ID : SB23.4427**

Amount of Each Disbursement this Period

389.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

**Transaction ID : SB23.4428**

Amount of Each Disbursement this Period

334.60

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4429

Amount of Each Disbursement this Period

347.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4430

Amount of Each Disbursement this Period

521.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4431

Amount of Each Disbursement this Period

805.15

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4432

Amount of Each Disbursement this Period

805.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4433

Amount of Each Disbursement this Period

172.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 22 / 2015

Transaction ID : SB23.4434

Amount of Each Disbursement this Period

112.45

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.4435**

Amount of Each Disbursement this Period

658.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.4436**

Amount of Each Disbursement this Period

601.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4437**

Amount of Each Disbursement this Period

105.87

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4438**

Amount of Each Disbursement this Period

275.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4439**

Amount of Each Disbursement this Period

109.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.4440**

Amount of Each Disbursement this Period

508.76

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4446

Amount of Each Disbursement this Period

52.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4441

Amount of Each Disbursement this Period

991.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AVIS RENT-A-CAR**

Mailing Address 6 SYLVAN WAY

City State Zip Code  
PARSIPPANY-TROY HILLS NJ 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4442

Amount of Each Disbursement this Period

500.59

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BALBOA BAY RESORT**

Mailing Address 1221 W COAST HIGHWAY

City NEWPORT BEACH State CA Zip Code 92663

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4449

Amount of Each Disbursement this Period

20140.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THERESA BALISTRERI**

Mailing Address 4085 S ADELL AVE

City NEW BERLIN State WI Zip Code 53151

Purpose of Disbursement  
EVENT CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6895

Amount of Each Disbursement this Period

423.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BAREFOOT CODERS LLC**

Mailing Address 1923 BRAGG STREET #140-2433

City STANFORD State NC Zip Code 27330

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4451

Amount of Each Disbursement this Period

11250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

31813.71

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6273**

Amount of Each Disbursement this Period

3640.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6274**

Amount of Each Disbursement this Period

4003.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6275**

Amount of Each Disbursement this Period

4012.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6276**

Amount of Each Disbursement this Period

4003.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6277**

Amount of Each Disbursement this Period

4012.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6278**

Amount of Each Disbursement this Period

4003.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN PARKS BENNETT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6279**

Amount of Each Disbursement this Period

1868.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

**Transaction ID : SB23.6281**

Amount of Each Disbursement this Period

14.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

**Transaction ID : SB23.6282**

Amount of Each Disbursement this Period

22.44

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6283**

Amount of Each Disbursement this Period

24.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6291**

Amount of Each Disbursement this Period

2948.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SB23.6284**

Amount of Each Disbursement this Period

59.73

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

**Transaction ID : SB23.6285**

Amount of Each Disbursement this Period

45.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SB23.6286**

Amount of Each Disbursement this Period

24.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

**Transaction ID : SB23.6287**

Amount of Each Disbursement this Period

30.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.6288

Amount of Each Disbursement this Period

11.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6289

Amount of Each Disbursement this Period

41.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6292

Amount of Each Disbursement this Period

3261.89

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

**Transaction ID : SB23.6290**

Amount of Each Disbursement this Period

6.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6896**

Amount of Each Disbursement this Period

220.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6293**

Amount of Each Disbursement this Period

3236.54

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

220.77

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6897**

Amount of Each Disbursement this Period

127.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6294**

Amount of Each Disbursement this Period

3246.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.6898**

Amount of Each Disbursement this Period

251.42

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

379.39

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.6899**

Amount of Each Disbursement this Period

2451.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6295**

Amount of Each Disbursement this Period

3223.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6900**

Amount of Each Disbursement this Period

1422.51

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3874.44

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAYLA J BERUBE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6296**

Amount of Each Disbursement this Period

1490.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BEST BUY**

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code  
RICHFIELD MN 55423

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: OFFICE EQUIPMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.4453**

Amount of Each Disbursement this Period

453.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BEST BUY**

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code  
RICHFIELD MN 55423

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

**Transaction ID : SB23.4454**

Amount of Each Disbursement this Period

34.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BEST BUY**

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code  
RICHFEILD MN 55423

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.4455

Amount of Each Disbursement this Period

1012.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BEST BUY**

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code  
RICHFEILD MN 55423

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: OFFICE EQUIPMENT  
PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.4457

Amount of Each Disbursement this Period

1012.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BEST BUY**

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code  
RICHFEILD MN 55423

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4456

Amount of Each Disbursement this Period

10.54

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BEST BUY**

Mailing Address 7601 PENN AVENUE SOUTH

City State Zip Code  
RICHFIELD MN 55423

Purpose of Disbursement  
SMITH 09/24 REIMBURSEMENT: OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 06 / 2015

Transaction ID : SB23.4458

Amount of Each Disbursement this Period

32.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

Transaction ID : SB23.4460

Amount of Each Disbursement this Period

131.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

Transaction ID : SB23.4461

Amount of Each Disbursement this Period

131.03

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4462**

Amount of Each Disbursement this Period

293.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4463**

Amount of Each Disbursement this Period

134.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.4466**

Amount of Each Disbursement this Period

302.38

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4464

Amount of Each Disbursement this Period

212.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BEST WESTERN**

Mailing Address 6201 N 24TH PKWY

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4465

Amount of Each Disbursement this Period

212.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BIG APPLE EVENTS AV**

Mailing Address 519 8TH AVE SUITE 815

City State Zip Code  
NEW YORK NY 10018

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4468

Amount of Each Disbursement this Period

1085.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BIG APPLE EVENTS AV**

Mailing Address 519 8TH AVE SUITE 815

City State Zip Code  
NEW YORK NY 10018

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4469

Amount of Each Disbursement this Period

112.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL E BIR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6298

Amount of Each Disbursement this Period

6675.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL E BIR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6299

Amount of Each Disbursement this Period

7330.54

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL E BIR**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6300

Amount of Each Disbursement this Period

7702.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL E BIR**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6301

Amount of Each Disbursement this Period

7137.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL E BIR**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6302

Amount of Each Disbursement this Period

7112.94

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL E BIR**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6303

Amount of Each Disbursement this Period

3285.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BK DSI LLC**

Mailing Address 405 DORAL COURT

City WAUNAKEE State WI Zip Code 53597

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4471

Amount of Each Disbursement this Period

7967.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BK DSI LLC**

Mailing Address 405 DORAL COURT

City WAUNAKEE State WI Zip Code 53597

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.4472

Amount of Each Disbursement this Period

5500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

13467.48

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BKZ CONSULTING INC.**

Mailing Address PO BOX 577832

City  
CHICAGO

State  
IL

Zip Code  
60657

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.4474**

Amount of Each Disbursement this Period

1082.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BLAZEMETER INC**

Mailing Address 785 CASTRO ST

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94041

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.4476**

Amount of Each Disbursement this Period

149.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BLAZEMETER INC**

Mailing Address 785 CASTRO ST

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94041

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.4477**

Amount of Each Disbursement this Period

149.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1082.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BMI**

Mailing Address PO BOX 630893

City CINCINNATI State OH Zip Code 45263

Purpose of Disbursement  
MUSIC LICENSING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4479**

Amount of Each Disbursement this Period

545.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BMO HARRIS BANK**

Mailing Address 1 W MAIN STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

**Transaction ID : SB23.4481**

Amount of Each Disbursement this Period

352.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BMO HARRIS BANK**

Mailing Address 1 W MAIN STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

**Transaction ID : SB23.4482**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

907.74

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BMO HARRIS BANK**

Mailing Address 1 W MAIN STREET

City  
MADISON

State  
WI

Zip Code  
53703

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.4483

Amount of Each Disbursement this Period

257.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALEXANDRA BOETTCHER**

Mailing Address 1802 PANKRATZ STREET

City  
MADISON

State  
WI

Zip Code  
53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6305

Amount of Each Disbursement this Period

766.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALEXANDRA BOETTCHER**

Mailing Address 1802 PANKRATZ STREET

City  
MADISON

State  
WI

Zip Code  
53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6306

Amount of Each Disbursement this Period

1586.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

257.61

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALEXANDRA BOETTCHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6307**

Amount of Each Disbursement this Period

733.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALI BOETTCHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6902**

Amount of Each Disbursement this Period

259.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6309**

Amount of Each Disbursement this Period

6828.90

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

259.45

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6310

Amount of Each Disbursement this Period

7708.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6311

Amount of Each Disbursement this Period

7942.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6312

Amount of Each Disbursement this Period

7708.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6313

Amount of Each Disbursement this Period

7733.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6314

Amount of Each Disbursement this Period

7708.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6903

Amount of Each Disbursement this Period

46493.12

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

46493.12

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DARREN K BOLDING**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6315

Amount of Each Disbursement this Period

3675.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BOX**

Mailing Address 4440 EL CAMINO REAL

City State Zip Code  
LOS ALTOS CA 94022

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

Transaction ID : SB23.4485

Amount of Each Disbursement this Period

1700.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BOX**

Mailing Address 4440 EL CAMINO REAL

City State Zip Code  
LOS ALTOS CA 94022

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4486

Amount of Each Disbursement this Period

79.84

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BOX**

Mailing Address 4440 EL CAMINO REAL

City State Zip Code  
LOS ALTOS CA 94022

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4487

Amount of Each Disbursement this Period

10.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6317

Amount of Each Disbursement this Period

674.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6318

Amount of Each Disbursement this Period

1746.39

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6319**

Amount of Each Disbursement this Period

1770.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6320**

Amount of Each Disbursement this Period

1746.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6321**

Amount of Each Disbursement this Period

1770.12

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6322**

Amount of Each Disbursement this Period

1746.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EVAN S BRADTKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6323**

Amount of Each Disbursement this Period

830.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ELLEN MARIE BREDENKOETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6325**

Amount of Each Disbursement this Period

3849.62

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. ELLEN MARIE BREDENKOETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6326

Amount of Each Disbursement this Period

4232.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. ELLEN MARIE BREDENKOETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6327

Amount of Each Disbursement this Period

4242.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. ELLEN MARIE BREDENKOETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6328

Amount of Each Disbursement this Period

4232.46

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ELLEN MARIE BREDENKOETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6329**

Amount of Each Disbursement this Period

4242.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ELLEN MARIE BREDENKOETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6330**

Amount of Each Disbursement this Period

4232.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ELLEN MARIE BREDENKOETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6331**

Amount of Each Disbursement this Period

1977.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BREITBART NEWS NETWORK LLC**

Mailing Address 8383 WILSHIRE BLVD #1000

City State Zip Code  
BEVERLY HILLS CA 90211

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.4489**

Amount of Each Disbursement this Period

12500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6333**

Amount of Each Disbursement this Period

5663.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6334**

Amount of Each Disbursement this Period

7907.07

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

12500.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6335**

Amount of Each Disbursement this Period

8085.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6336**

Amount of Each Disbursement this Period

7907.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6906**

Amount of Each Disbursement this Period

605.25

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

605.25

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6337

Amount of Each Disbursement this Period

7930.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6907

Amount of Each Disbursement this Period

106.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6338

Amount of Each Disbursement this Period

7907.07

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

106.17

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW BREMBERG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6339**

Amount of Each Disbursement this Period

3773.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BROOK FURNITURE RENTAL INC.**

Mailing Address 24997 NETWORK PLACE

City State Zip Code  
CHICAGO IL 60673

Purpose of Disbursement  
OFFICE FURNITURE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.4491**

Amount of Each Disbursement this Period

9744.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BUCKHEAD CLUB INC.**

Mailing Address 3344 PEACHTREE ROAD NE #2600

City State Zip Code  
ATLANTA GA 30326

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.4493**

Amount of Each Disbursement this Period

3859.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

13603.55

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. BUDGET RENT A CAR**

Mailing Address 6 SYLVAN WAY

City PARSIPPANY-TROY HILLS State NJ Zip Code 07054

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

Transaction ID : SB23.4495

Amount of Each Disbursement this Period

167.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BUDGET RENT A CAR**

Mailing Address 6 SYLVAN WAY

City PARSIPPANY-TROY HILLS State NJ Zip Code 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4496

Amount of Each Disbursement this Period

104.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BUDGET RENT A CAR**

Mailing Address 6 SYLVAN WAY

City PARSIPPANY-TROY HILLS State NJ Zip Code 07054

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4497

Amount of Each Disbursement this Period

125.37

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DARRELL BURT**

Mailing Address 2747 170TH STREET

City MARSHALLTOWN State IA Zip Code 50158

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6909

Amount of Each Disbursement this Period

301.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. BUTTE DES MORTS COUNTRY CLUB INC.**

Mailing Address 3600 W PROSPECT AVENUE

City APPLETON State WI Zip Code 54914

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.4499

Amount of Each Disbursement this Period

1834.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CAMPAIGN PROMOTIONS LLC**

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4501

Amount of Each Disbursement this Period

19393.65

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

21529.61

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CAMPAIGN SOLUTIONS**

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.4503

Amount of Each Disbursement this Period

93737.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CAMPAIGN SOLUTIONS**

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.4504

Amount of Each Disbursement this Period

2091.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CAMPAIGN SOLUTIONS**

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4505

Amount of Each Disbursement this Period

232047.99

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

327876.64

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CAMPAIGN SOLUTIONS**

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4506

Amount of Each Disbursement this Period

18249.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CAMPAIGN SOLUTIONS**

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4507

Amount of Each Disbursement this Period

5458.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CAPITAL COFFEE LLC**

Mailing Address 4719 IVYWOOD TRAIL

City MCFARLAND State WI Zip Code 53558

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4510

Amount of Each Disbursement this Period

126.49

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

23835.46

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CAPITOL STRATEGY GROUP INC.**

Mailing Address 2700 CUMBERLAND PKWY #150

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4512**

Amount of Each Disbursement this Period

8540.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 27 / 2015

**Transaction ID : SB23.4514**

Amount of Each Disbursement this Period

81.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

**Transaction ID : SB23.4515**

Amount of Each Disbursement this Period

72.47

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

8540.07

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: VOLUNTEER FOOD

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4516

Amount of Each Disbursement this Period

27.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/09 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4528

Amount of Each Disbursement this Period

27.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4517

Amount of Each Disbursement this Period

124.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4521

Amount of Each Disbursement this Period

20.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4522

Amount of Each Disbursement this Period

25.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4519

Amount of Each Disbursement this Period

27.83

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City  
ANKENY

State  
IA

Zip Code  
50021

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4526

Amount of Each Disbursement this Period

38.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City  
ANKENY

State  
IA

Zip Code  
50021

Purpose of Disbursement  
NEITZEL 09/09 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

Transaction ID : SB23.4523

Amount of Each Disbursement this Period

18.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City  
ANKENY

State  
IA

Zip Code  
50021

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

Transaction ID : SB23.4527

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.4520**

Amount of Each Disbursement this Period

16.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
NEITZEL 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

**Transaction ID : SB23.4524**

Amount of Each Disbursement this Period

27.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
NEITZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

**Transaction ID : SB23.4525**

Amount of Each Disbursement this Period

7.79

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

Transaction ID : SB23.4531

Amount of Each Disbursement this Period

4.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 18 / 2015

Transaction ID : SB23.4529

Amount of Each Disbursement this Period

36.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 18 / 2015

Transaction ID : SB23.4530

Amount of Each Disbursement this Period

29.14

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

**Transaction ID : SB23.4518**

Amount of Each Disbursement this Period

2.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

**Transaction ID : SB23.4532**

Amount of Each Disbursement this Period

4.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 20 / 2015

**Transaction ID : SB23.4533**

Amount of Each Disbursement this Period

2.06

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CASEY'S GENERAL STORE**

Mailing Address 1 CONVENIENCE ROAD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 20 / 2015

Transaction ID : SB23.4534

Amount of Each Disbursement this Period

2.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6341

Amount of Each Disbursement this Period

4932.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6342

Amount of Each Disbursement this Period

6226.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6343

Amount of Each Disbursement this Period

6445.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6344

Amount of Each Disbursement this Period

6226.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6345

Amount of Each Disbursement this Period

6251.48

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6346**

Amount of Each Disbursement this Period

6226.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CURTIS E CASHOUR**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6347**

Amount of Each Disbursement this Period

2919.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CEDAR RAPIDS MUSEUM OF ART**

Mailing Address 410 THIRD AVE SE

City State Zip Code  
CEDAR RAPIDS IA 52401

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.4536**

Amount of Each Disbursement this Period

580.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

580.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATT CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
CENSKY 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6349

Amount of Each Disbursement this Period

14.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATT CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
CENSKY 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.6350

Amount of Each Disbursement this Period

14.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6352

Amount of Each Disbursement this Period

1945.45

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6353**

Amount of Each Disbursement this Period

2658.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6354**

Amount of Each Disbursement this Period

3311.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6355**

Amount of Each Disbursement this Period

2883.33

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6356**

Amount of Each Disbursement this Period

2907.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6357**

Amount of Each Disbursement this Period

2883.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHIAS J CENSKY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6358**

Amount of Each Disbursement this Period

1355.64

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CHARTER COMMUNICATIONS**

Mailing Address PO BOX 3019

City  
MIWAUKEE

State  
WI

Zip Code  
53201

Purpose of Disbursement  
INTERNET/TELEPHONE SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.4538**

Amount of Each Disbursement this Period

8018.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CHARTER COMMUNICATIONS**

Mailing Address PO BOX 3019

City  
MIWAUKEE

State  
WI

Zip Code  
53201

Purpose of Disbursement  
INTERNET/TELEPHONE SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4539**

Amount of Each Disbursement this Period

1975.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CHARTER COMMUNICATIONS**

Mailing Address PO BOX 3019

City  
MIWAUKEE

State  
WI

Zip Code  
53201

Purpose of Disbursement  
INTERNET/TELEPHONE SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.4540**

Amount of Each Disbursement this Period

5302.04

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

15295.28

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ELIZABETH E CHRISTOFFERSEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6360

Amount of Each Disbursement this Period

3607.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ELIZABETH E CHRISTOFFERSEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6361

Amount of Each Disbursement this Period

3635.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ELIZABETH E CHRISTOFFERSEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6362

Amount of Each Disbursement this Period

3614.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ELIZABETH E CHRISTOFFERSEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6363**

Amount of Each Disbursement this Period

1666.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CIBO FUSION**

Mailing Address 685 MARION RD

City State Zip Code  
MARION IA 52302

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 26 / 2015

**Transaction ID : SB23.4542**

Amount of Each Disbursement this Period

258.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CITADEL REPUBLICAN SOCIETY**

Mailing Address 171 MOULTRIE STREET

City State Zip Code  
CHARLESTON SC 29409

Purpose of Disbursement  
CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

**Transaction ID : SB23.4544**

Amount of Each Disbursement this Period

1161.08

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1161.08

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CITY TREASURER**

Mailing Address PO BOX 2997

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4546

Amount of Each Disbursement this Period

1137.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CITY TREASURER**

Mailing Address PO BOX 2997

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.4547

Amount of Each Disbursement this Period

166.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CLEARWING PRODUCTIONS INC.**

Mailing Address 11101 W MITCHELL ST

City MILWAUKEE State WI Zip Code 53214

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4549

Amount of Each Disbursement this Period

41300.57

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

42604.41

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COLBY PEAKS CONSULTING**

Mailing Address 2565 WIMBLETON PLACE

City State Zip Code  
WOODBURY MN 55125

Purpose of Disbursement  
CONFERENCE CALLS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4551

Amount of Each Disbursement this Period

471.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4553

Amount of Each Disbursement this Period

151.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4554

Amount of Each Disbursement this Period

124.27

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

471.80

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4556

Amount of Each Disbursement this Period

156.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4557

Amount of Each Disbursement this Period

156.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4558

Amount of Each Disbursement this Period

156.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4559

Amount of Each Disbursement this Period

162.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4555

Amount of Each Disbursement this Period

123.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COMFORT INN**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4560

Amount of Each Disbursement this Period

215.82

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COMFORT SUITES**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4562

Amount of Each Disbursement this Period

133.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COMFORT SUITES**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4563

Amount of Each Disbursement this Period

133.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COMFORT SUITES**

Mailing Address 10750 COLUMBIA PIKE

City State Zip Code  
SILVER SPRING MD 20901

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4564

Amount of Each Disbursement this Period

133.09

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COMMUNICATIONS CORPORATION OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City State Zip Code  
BOSTON VA 22713

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.4566

Amount of Each Disbursement this Period

28932.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COMMUNICATIONS CORPORATION OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City State Zip Code  
BOSTON VA 22713

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.4567

Amount of Each Disbursement this Period

30400.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COMMUNICATIONS CORPORATION OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City State Zip Code  
BOSTON VA 22713

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4568

Amount of Each Disbursement this Period

41488.98

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

100822.46

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COMMUNICATIONS CORPORATION OF AMERICA**

Mailing Address 13195 FREEDOM WAY

City State Zip Code  
BOSTON VA 22713

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

Transaction ID : SB23.4569

Amount of Each Disbursement this Period

20998.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CONNECTIVIST MEDIA**

Mailing Address 544 E OGDEN AVE  
#700-161

City State Zip Code  
MILWAUKEE WI 53202

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4570

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CONNECTIVIST MEDIA**

Mailing Address 544 E OGDEN AVE  
#700-161

City State Zip Code  
MILWAUKEE WI 53202

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4571

Amount of Each Disbursement this Period

30913.56

☐ Memo Item

Subtotal Of Receipts This Page (optional)..... 71911.94

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CONNECTIVIST MEDIA**

Mailing Address 544 E OGDEN AVE  
#700-161

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.4572

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATT CONNELLY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6913

Amount of Each Disbursement this Period

333.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW J CONNELLY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6365

Amount of Each Disbursement this Period

4889.93

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

10333.38

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW J CONNELLY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6366

Amount of Each Disbursement this Period

4849.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW J CONNELLY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6367

Amount of Each Disbursement this Period

4640.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW J CONNELLY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6914

Amount of Each Disbursement this Period

417.45

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

417.45

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW J CONNELLY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6368**

Amount of Each Disbursement this Period

2144.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CONSILIUM CONNECT LLC**

Mailing Address PO BOX 10669

City State Zip Code  
RALEIGH NC 27605

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4574**

Amount of Each Disbursement this Period

4583.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6370**

Amount of Each Disbursement this Period

3615.60

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

4583.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6371

Amount of Each Disbursement this Period

7824.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6372

Amount of Each Disbursement this Period

7627.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6373

Amount of Each Disbursement this Period

7347.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6915

Amount of Each Disbursement this Period

262.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6374

Amount of Each Disbursement this Period

7338.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EMILY A CORNELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6375

Amount of Each Disbursement this Period

7338.13

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

262.55

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. ROBERT J COSTELLO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6377

Amount of Each Disbursement this Period

766.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBERT J COSTELLO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6378

Amount of Each Disbursement this Period

776.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBERT J COSTELLO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6379

Amount of Each Disbursement this Period

771.53

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COUNTRY CLUB OF YORK**

Mailing Address PO BOX 6

City YORK State PA Zip Code 17405

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4576**

Amount of Each Disbursement this Period

4335.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
EVENSON 07/22 REIMBURSEMENT: TRAVE: FOOD

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 21 / 2015

**Transaction ID : SB23.4587**

Amount of Each Disbursement this Period

43.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 24 / 2015

**Transaction ID : SB23.4589**

Amount of Each Disbursement this Period

782.65

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

4335.33

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

**Transaction ID : SB23.4590**

Amount of Each Disbursement this Period

144.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.4591**

Amount of Each Disbursement this Period

144.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
ODRISCOLL 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.4600**

Amount of Each Disbursement this Period

340.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4579

Amount of Each Disbursement this Period

4.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HERSHNER 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4592

Amount of Each Disbursement this Period

2.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4593

Amount of Each Disbursement this Period

5.89

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4594

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 07/22 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4607

Amount of Each Disbursement this Period

173.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4580

Amount of Each Disbursement this Period

173.31

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4581

Amount of Each Disbursement this Period

3292.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4582

Amount of Each Disbursement this Period

866.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4603

Amount of Each Disbursement this Period

80.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4583

Amount of Each Disbursement this Period

160.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4604

Amount of Each Disbursement this Period

399.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4584

Amount of Each Disbursement this Period

2431.49

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4601

Amount of Each Disbursement this Period

345.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4585

Amount of Each Disbursement this Period

7336.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4586

Amount of Each Disbursement this Period

2113.03

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.4608

Amount of Each Disbursement this Period

220.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.4610

Amount of Each Disbursement this Period

19.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.4611

Amount of Each Disbursement this Period

60.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.4612

Amount of Each Disbursement this Period

16.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

Transaction ID : SB23.4609

Amount of Each Disbursement this Period

178.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

Transaction ID : SB23.4613

Amount of Each Disbursement this Period

15.80

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

**Transaction ID : SB23.4614**

Amount of Each Disbursement this Period

60.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

**Transaction ID : SB23.4615**

Amount of Each Disbursement this Period

13.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 05 / 2015

**Transaction ID : SB23.4588**

Amount of Each Disbursement this Period

125.46

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.4578**

Amount of Each Disbursement this Period

157.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.4595**

Amount of Each Disbursement this Period

2.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.4596**

Amount of Each Disbursement this Period

5.35

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
O'DRISCOLL 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

Transaction ID : SB23.4602

Amount of Each Disbursement this Period

157.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

Transaction ID : SB23.4597

Amount of Each Disbursement this Period

7.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

Transaction ID : SB23.4598

Amount of Each Disbursement this Period

6.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
NEITZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2015

**Transaction ID : SB23.4599**

Amount of Each Disbursement this Period

13.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
SMITH 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

**Transaction ID : SB23.4605**

Amount of Each Disbursement this Period

314.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

**Transaction ID : SB23.4606**

Amount of Each Disbursement this Period

311.36

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6381

Amount of Each Disbursement this Period

4257.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6382

Amount of Each Disbursement this Period

4682.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6383

Amount of Each Disbursement this Period

4691.69

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6384

Amount of Each Disbursement this Period

4906.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.6918

Amount of Each Disbursement this Period

6926.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6385

Amount of Each Disbursement this Period

5604.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

6926.21

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6386**

Amount of Each Disbursement this Period

4906.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COLLEEN COYLE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6387**

Amount of Each Disbursement this Period

4906.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NATHAN A CRAFT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6389**

Amount of Each Disbursement this Period

1181.99

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NATHAN A CRAFT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6390

Amount of Each Disbursement this Period

1307.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NATHAN A CRAFT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6391

Amount of Each Disbursement this Period

1297.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NATHAN A CRAFT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6392

Amount of Each Disbursement this Period

1515.72

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NATHAN A CRAFT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6393

Amount of Each Disbursement this Period

1586.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NATHAN A CRAFT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6394

Amount of Each Disbursement this Period

733.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CRAZY EGG**

Mailing Address 16220 EAST RIDGEVIEW LAND

City State Zip Code  
LA MIRANDA CA 90638

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: WEB DEVELOPMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4617

Amount of Each Disbursement this Period

1188.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CROWNE PLAZA**

Mailing Address **3 RAVINIA DRIVE**  
**SUITE 100**

City **ATLANTA** State **GA** Zip Code **30346**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
**07 / 28 / 2015**

**Transaction ID : SB23.4619**

Amount of Each Disbursement this Period

**1329.39**

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CROWNE PLAZA**

Mailing Address **3 RAVINIA DRIVE**  
**SUITE 100**

City **ATLANTA** State **GA** Zip Code **30346**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
**08 / 11 / 2015**

**Transaction ID : SB23.4620**

Amount of Each Disbursement this Period

**1522.90**

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CROWNE PLAZA**

Mailing Address **3 RAVINIA DRIVE**  
**SUITE 100**

City **ATLANTA** State **GA** Zip Code **30346**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
**08 / 25 / 2015**

**Transaction ID : SB23.4621**

Amount of Each Disbursement this Period

**218.00**

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

**0.00**

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CROWNE PLAZA**

Mailing Address 3 RAVINIA DRIVE  
SUITE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4622

Amount of Each Disbursement this Period

658.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CROWNE PLAZA**

Mailing Address 3 RAVINIA DRIVE  
SUITE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4623

Amount of Each Disbursement this Period

998.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6396

Amount of Each Disbursement this Period

2228.63

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6397

Amount of Each Disbursement this Period

2460.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6398

Amount of Each Disbursement this Period

3123.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6399

Amount of Each Disbursement this Period

2694.80

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6400

Amount of Each Disbursement this Period

2663.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6919

Amount of Each Disbursement this Period

1869.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CARLOS M CRUZ**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6401

Amount of Each Disbursement this Period

1231.95

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

1869.63

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. CRYSTAL ROWLAND & ASSOCIATES**

Mailing Address 302 WASHINGTON STREET #555

City  
SAN DIEGO

State  
CA

Zip Code  
92103

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4625

Amount of Each Disbursement this Period

11017.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CRYSTAL ROWLAND & ASSOCIATES**

Mailing Address 302 WASHINGTON STREET #555

City  
SAN DIEGO

State  
CA

Zip Code  
92103

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.4626

Amount of Each Disbursement this Period

7945.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. CUBE SERVICES INC.**

Mailing Address 4098 S MCCARRAN BLVD

City  
RENO

State  
NV

Zip Code  
89502

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4628

Amount of Each Disbursement this Period

940.97

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

19903.06

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4630

Amount of Each Disbursement this Period

40.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
WACLAWSKI 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 15 / 2015

Transaction ID : SB23.4637

Amount of Each Disbursement this Period

16.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.4631

Amount of Each Disbursement this Period

80.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.4634

Amount of Each Disbursement this Period

70.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.4638

Amount of Each Disbursement this Period

30.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

Transaction ID : SB23.4632

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 09/17 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

Transaction ID : SB23.4635

Amount of Each Disbursement this Period

67.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2015

Transaction ID : SB23.4633

Amount of Each Disbursement this Period

40.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANE COUNTY REGIONAL AIRPORT**

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

Transaction ID : SB23.4636

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6403**

Amount of Each Disbursement this Period

2097.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6404**

Amount of Each Disbursement this Period

2316.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6405**

Amount of Each Disbursement this Period

2306.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6406

Amount of Each Disbursement this Period

2314.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6407

Amount of Each Disbursement this Period

2295.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6922

Amount of Each Disbursement this Period

318.60

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

318.60

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANASTASIA J DAY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6408

Amount of Each Disbursement this Period

1060.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City State Zip Code  
ATLANTA GA 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4640

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City State Zip Code  
ATLANTA GA 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4641

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4642

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4643

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4644

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4645

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4646

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4647

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4648

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4649

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4650

Amount of Each Disbursement this Period

235.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4651

Amount of Each Disbursement this Period

235.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 10 / 2015

Transaction ID : SB23.4652

Amount of Each Disbursement this Period

235.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

Transaction ID : SB23.4783

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4653

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4654

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4655

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4656

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4657

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4658

Amount of Each Disbursement this Period

69.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4659

Amount of Each Disbursement this Period

69.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4660

Amount of Each Disbursement this Period

89.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4661

Amount of Each Disbursement this Period

89.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.4662

Amount of Each Disbursement this Period

89.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4663

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4664

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4665

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4666

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4667

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4668

Amount of Each Disbursement this Period

69.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.4669

Amount of Each Disbursement this Period

89.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

Transaction ID : SB23.4784

Amount of Each Disbursement this Period

470.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.4670

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.4671

Amount of Each Disbursement this Period

392.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.4672

Amount of Each Disbursement this Period

564.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.4678

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.4679

Amount of Each Disbursement this Period

809.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 04 / 2015

Transaction ID : SB23.4673

Amount of Each Disbursement this Period

-392.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 04 / 2015

**Transaction ID : SB23.4674**

Amount of Each Disbursement this Period

727.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 04 / 2015

**Transaction ID : SB23.4675**

Amount of Each Disbursement this Period

1438.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

**Transaction ID : SB23.4676**

Amount of Each Disbursement this Period

763.20

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

**Transaction ID : SB23.4680**

Amount of Each Disbursement this Period

178.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

**Transaction ID : SB23.4797**

Amount of Each Disbursement this Period

846.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PURCELL 07/22 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

**Transaction ID : SB23.4798**

Amount of Each Disbursement this Period

671.20

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

Transaction ID : SB23.4681

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.4682

Amount of Each Disbursement this Period

691.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
OCZKOWSKI 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.4794

Amount of Each Disbursement this Period

393.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
OCZKOWSKI 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.4795

Amount of Each Disbursement this Period

16.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
OCZKOWSKI 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.4796

Amount of Each Disbursement this Period

16.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

Transaction ID : SB23.4683

Amount of Each Disbursement this Period

479.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

Transaction ID : SB23.4684

Amount of Each Disbursement this Period

479.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

Transaction ID : SB23.4685

Amount of Each Disbursement this Period

479.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.4686

Amount of Each Disbursement this Period

588.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4687

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4688

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
KLUG 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4791

Amount of Each Disbursement this Period

438.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4689

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4690

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4691

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4692

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4693

Amount of Each Disbursement this Period

234.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4694

Amount of Each Disbursement this Period

274.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4695

Amount of Each Disbursement this Period

274.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4696

Amount of Each Disbursement this Period

369.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4697

Amount of Each Disbursement this Period

369.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4698

Amount of Each Disbursement this Period

317.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4699

Amount of Each Disbursement this Period

317.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4700

Amount of Each Disbursement this Period

55.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4701

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4702

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4703

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4704

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4705

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4706

Amount of Each Disbursement this Period

55.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4707

Amount of Each Disbursement this Period

55.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4708

Amount of Each Disbursement this Period

680.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4709

Amount of Each Disbursement this Period

584.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4710

Amount of Each Disbursement this Period

449.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4711

Amount of Each Disbursement this Period

306.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4712

Amount of Each Disbursement this Period

664.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4713

Amount of Each Disbursement this Period

464.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4714

Amount of Each Disbursement this Period

817.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4677

Amount of Each Disbursement this Period

388.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4785

Amount of Each Disbursement this Period

419.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4715

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4792

Amount of Each Disbursement this Period

777.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4716

Amount of Each Disbursement this Period

406.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4717

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4718

Amount of Each Disbursement this Period

536.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4719

Amount of Each Disbursement this Period

515.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4730

Amount of Each Disbursement this Period

445.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4731

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4732

Amount of Each Disbursement this Period

437.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4786

Amount of Each Disbursement this Period

551.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4720

Amount of Each Disbursement this Period

522.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4733

Amount of Each Disbursement this Period

514.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4734

Amount of Each Disbursement this Period

425.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4735

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4721

Amount of Each Disbursement this Period

-55.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4722

Amount of Each Disbursement this Period

-55.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4723

Amount of Each Disbursement this Period

-55.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4736

Amount of Each Disbursement this Period

426.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4737

Amount of Each Disbursement this Period

426.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4738

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4739

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4740

Amount of Each Disbursement this Period

426.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4741

Amount of Each Disbursement this Period

426.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4742

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4743

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4744

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4745

Amount of Each Disbursement this Period

426.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4746

Amount of Each Disbursement this Period

812.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.4747

Amount of Each Disbursement this Period

576.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.4748

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4749

Amount of Each Disbursement this Period

287.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4750

Amount of Each Disbursement this Period

287.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4751

Amount of Each Disbursement this Period

287.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4752

Amount of Each Disbursement this Period

287.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4787

Amount of Each Disbursement this Period

292.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.4753

Amount of Each Disbursement this Period

509.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.4754

Amount of Each Disbursement this Period

509.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.4755

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.4756

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4757

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4758

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4759

Amount of Each Disbursement this Period

649.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4760

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4761

Amount of Each Disbursement this Period

649.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4762

Amount of Each Disbursement this Period

649.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4763

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4764

Amount of Each Disbursement this Period

562.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4765

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4766

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4767

Amount of Each Disbursement this Period

649.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4768

Amount of Each Disbursement this Period

649.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.4769

Amount of Each Disbursement this Period

649.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.4724

Amount of Each Disbursement this Period

564.70

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.4725

Amount of Each Disbursement this Period

564.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.4770

Amount of Each Disbursement this Period

235.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.4771

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.4772

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.4773

Amount of Each Disbursement this Period

235.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.4726

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.4727

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.4728

Amount of Each Disbursement this Period

600.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4729

Amount of Each Disbursement this Period

782.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4774

Amount of Each Disbursement this Period

499.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4775

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4776

Amount of Each Disbursement this Period

437.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
WACLAWSKI 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.4799

Amount of Each Disbursement this Period

512.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.4777

Amount of Each Disbursement this Period

416.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.4788

Amount of Each Disbursement this Period

556.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4778

Amount of Each Disbursement this Period

1318.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4789

Amount of Each Disbursement this Period

173.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4779

Amount of Each Disbursement this Period

406.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4780

Amount of Each Disbursement this Period

406.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.4801

Amount of Each Disbursement this Period

521.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4781

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.4782

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
GALLATIN 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

Transaction ID : SB23.4790

Amount of Each Disbursement this Period

530.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
WACLAWSKI 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

Transaction ID : SB23.4800

Amount of Each Disbursement this Period

373.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

Transaction ID : SB23.4802

Amount of Each Disbursement this Period

266.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
NEITZEL 09/17 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.4793

Amount of Each Disbursement this Period

454.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.4803

Amount of Each Disbursement this Period

330.50

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL A DEMKIW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6410

Amount of Each Disbursement this Period

1161.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL A DEMKIW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6411

Amount of Each Disbursement this Period

1595.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL A DEMKIW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6412

Amount of Each Disbursement this Period

2185.01

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL A DEMKIW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6413

Amount of Each Disbursement this Period

1829.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL A DEMKIW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6414

Amount of Each Disbursement this Period

1810.05

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL A DEMKIW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6415

Amount of Each Disbursement this Period

838.11

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DESIGN FOUNDRY**

Mailing Address 1851 SOUTH CLUB DRIVE

City State Zip Code  
HYATTSVILLE MD 20785

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.4805

Amount of Each Disbursement this Period

44240.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4809

Amount of Each Disbursement this Period

45226.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4807

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

89466.06

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4810

Amount of Each Disbursement this Period

65961.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4811

Amount of Each Disbursement this Period

54363.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

Transaction ID : SB23.4808

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

120325.33

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.4812**

Amount of Each Disbursement this Period

86300.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DINERS CLUB MASTERCARD**

Mailing Address PO BOX 5732

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

**Transaction ID : SB23.4813**

Amount of Each Disbursement this Period

60000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DIRECT MAIL MARKETING GROUP**

Mailing Address 22780 INDIAN CREEK DRIVE

City State Zip Code  
DULLES VA 20166

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

**Transaction ID : SB23.4815**

Amount of Each Disbursement this Period

7344.16

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

153644.84

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DMM MEDIA**

Mailing Address 1911 N FORT MYER DRIVE #400

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
VIDEO PRODUCTION SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4817

Amount of Each Disbursement this Period

65883.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DORSEE PRODUCTIONS INC.**

Mailing Address PO BOX 455

City RANCHO SANTA FE State CA Zip Code 92067

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.4819

Amount of Each Disbursement this Period

11780.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOHN DORSEY**

Mailing Address 3100 WEST 68TH STREET

City MISSION HILLS State KS Zip Code 66208

Purpose of Disbursement  
EVENT ENTERTAINMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 28 / 2015

Transaction ID : SB23.6924

Amount of Each Disbursement this Period

630.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

78293.10

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DOUBLETREE**

Mailing Address 9336 CIVIC CTR DR

City State Zip Code  
BEVERLY HILLS CA 90210

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4821

Amount of Each Disbursement this Period

392.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DOUBLETREE**

Mailing Address 9336 CIVIC CTR DR

City State Zip Code  
BEVERLY HILLS CA 90210

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4822

Amount of Each Disbursement this Period

392.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DRUCKER LAWHON LLP**

Mailing Address 317 15TH STREET NE

City State Zip Code  
WASHINGTON DC 20002

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4824

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

15000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DRUCKER LAWHON LLP**

Mailing Address 317 15TH STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.4825**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City  
CANTON

State  
MA

Zip Code  
02021

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.4830**

Amount of Each Disbursement this Period

4.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City  
CANTON

State  
MA

Zip Code  
02021

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.4831**

Amount of Each Disbursement this Period

485.08

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

7500.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City State Zip Code  
CANTON MA 02021

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4832

Amount of Each Disbursement this Period

5.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City State Zip Code  
CANTON MA 02021

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.4828

Amount of Each Disbursement this Period

6.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City State Zip Code  
CANTON MA 02021

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 06 / 2015

Transaction ID : SB23.4827

Amount of Each Disbursement this Period

2.05

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City State Zip Code  
CANTON MA 02021

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

Transaction ID : SB23.4829

Amount of Each Disbursement this Period

11.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOHN DWYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6417

Amount of Each Disbursement this Period

13.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOHN DWYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6418

Amount of Each Disbursement this Period

866.67

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6424

Amount of Each Disbursement this Period

1855.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6425

Amount of Each Disbursement this Period

2029.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
EAGER 08/25 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.6423

Amount of Each Disbursement this Period

50.06

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6426

Amount of Each Disbursement this Period

2053.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6427

Amount of Each Disbursement this Period

2029.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6428

Amount of Each Disbursement this Period

2053.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6429**

Amount of Each Disbursement this Period

2029.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6928**

Amount of Each Disbursement this Period

95.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LEONARD EAGER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6430**

Amount of Each Disbursement this Period

961.59

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

95.94

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PRENTICE EAGER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
EAGER 07/28 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.6420

Amount of Each Disbursement this Period

36.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PRENTICE EAGER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
EAGER 07/28 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.6421

Amount of Each Disbursement this Period

36.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PRENTICE EAGER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.6930

Amount of Each Disbursement this Period

486.68

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

486.68

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EDGEWATER**

Mailing Address 1001 WISCONSIN PLACE

City State Zip Code  
MADISON WI 53703

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 13 / 2015

Transaction ID : SB23.4834

Amount of Each Disbursement this Period

34.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EDGEWATER**

Mailing Address 1001 WISCONSIN PLACE

City State Zip Code  
MADISON WI 53703

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.4835

Amount of Each Disbursement this Period

3.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ENTERPRISE RENT-A-CAR**

Mailing Address 600 CORPORATE PARK DRIVE ST

City State Zip Code  
ST LOUIS MO 63105

Purpose of Disbursement  
GRIFFITH 9/24 REIMBURSEMENT: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4837

Amount of Each Disbursement this Period

259.88

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ENTERPRISE RENT-A-CAR**

Mailing Address 600 CORPORATE PARK DRIVE ST

City State Zip Code  
ST LOUIS MO 63105

Purpose of Disbursement  
BOETTCHER 09/24 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

Transaction ID : SB23.4838

Amount of Each Disbursement this Period

165.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ENTERPRISE RENT-A-CAR**

Mailing Address 600 CORPORATE PARK DRIVE ST

City State Zip Code  
ST LOUIS MO 63105

Purpose of Disbursement  
GROTH 09/24 REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.4839

Amount of Each Disbursement this Period

166.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ESA CHICAGO - O'HARE**

Mailing Address 1207 E TOUHY AVE

City State Zip Code  
DES PLAINES IL 60018

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

Transaction ID : SB23.4841

Amount of Each Disbursement this Period

688.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW J EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6435

Amount of Each Disbursement this Period

2225.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANDREW J EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6437

Amount of Each Disbursement this Period

3437.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW J EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6439

Amount of Each Disbursement this Period

3258.41

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW J EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6441

Amount of Each Disbursement this Period

3269.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANDREW J EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6443

Amount of Each Disbursement this Period

3243.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW J EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6445

Amount of Each Disbursement this Period

1499.87

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6433**

Amount of Each Disbursement this Period

3450.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6436**

Amount of Each Disbursement this Period

3782.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6931**

Amount of Each Disbursement this Period

218.54

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

218.54

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 26 / 2015

**Transaction ID : SB23.6432**

Amount of Each Disbursement this Period

42.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6438**

Amount of Each Disbursement this Period

4501.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6440**

Amount of Each Disbursement this Period

4014.17

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.6932

Amount of Each Disbursement this Period

1277.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6442

Amount of Each Disbursement this Period

4039.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6933

Amount of Each Disbursement this Period

1410.36

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2688.16

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6444

Amount of Each Disbursement this Period

4014.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6934

Amount of Each Disbursement this Period

1172.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THOMAS EVENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6446

Amount of Each Disbursement this Period

3814.33

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

1172.49

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EXPEDIA**

Mailing Address 3150 139TH AVE SE

City State Zip Code  
BELLEVUE WA 98005

Purpose of Disbursement  
PURCELL 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4845

Amount of Each Disbursement this Period

589.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EXPEDIA**

Mailing Address 3150 139TH AVE SE

City State Zip Code  
BELLEVUE WA 98005

Purpose of Disbursement  
PURCELL 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4846

Amount of Each Disbursement this Period

399.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EXPEDIA**

Mailing Address 3150 139TH AVE SE

City State Zip Code  
BELLEVUE WA 98005

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.4844

Amount of Each Disbursement this Period

301.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EXPEDIA**

Mailing Address 3150 139TH AVE SE

City State Zip Code  
BELLEVUE WA 98005

Purpose of Disbursement  
PURCELL 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4847

Amount of Each Disbursement this Period

496.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EXPEDIA**

Mailing Address 3150 139TH AVE SE

City State Zip Code  
BELLEVUE WA 98005

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

Transaction ID : SB23.4843

Amount of Each Disbursement this Period

129.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EXXON MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 21 / 2015

Transaction ID : SB23.4849

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. EXXON MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SB23.4850**

Amount of Each Disbursement this Period

19.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. EXXON MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

**Transaction ID : SB23.4851**

Amount of Each Disbursement this Period

44.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. EXXON MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2015

**Transaction ID : SB23.4852**

Amount of Each Disbursement this Period

44.39

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOE FADNESS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6936

Amount of Each Disbursement this Period

208.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSEPH FADNESS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6448

Amount of Each Disbursement this Period

4449.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOSEPH FADNESS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6449

Amount of Each Disbursement this Period

4922.06

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

208.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOSEPH FADNESS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6450

Amount of Each Disbursement this Period

4677.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSEPH FADNESS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6451

Amount of Each Disbursement this Period

2161.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KATE FAHERTY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6453

Amount of Each Disbursement this Period

529.57

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FAIRFIELD INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.4856

Amount of Each Disbursement this Period

158.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FAIRFIELD INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB23.4857

Amount of Each Disbursement this Period

158.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FAIRFIELD INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4854

Amount of Each Disbursement this Period

123.74

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FAIRFIELD INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4855

Amount of Each Disbursement this Period

621.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSHUA V FALZONE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6455

Amount of Each Disbursement this Period

2751.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOSHUA V FALZONE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6456

Amount of Each Disbursement this Period

3036.77

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOSHUA V FALZONE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6457

Amount of Each Disbursement this Period

3719.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSHUA V FALZONE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6458

Amount of Each Disbursement this Period

3268.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOSHUA V FALZONE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6459

Amount of Each Disbursement this Period

3243.41

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOSHUA V FALZONE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6460**

Amount of Each Disbursement this Period

1499.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FASTLY INC.**

Mailing Address PO BOX 78266

City State Zip Code  
SAN FRANCISCO CA 94107

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4859**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FASTLY INC.**

Mailing Address PO BOX 78266

City State Zip Code  
SAN FRANCISCO CA 94107

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4860**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

10000.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

**Transaction ID : SB23.4890**

Amount of Each Disbursement this Period

32.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

**Transaction ID : SB23.4888**

Amount of Each Disbursement this Period

3.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
WOOD 08/07 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

**Transaction ID : SB23.4895**

Amount of Each Disbursement this Period

53.59

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

Transaction ID : SB23.4865

Amount of Each Disbursement this Period

25.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.4893

Amount of Each Disbursement this Period

21.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
WETZEL 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.4894

Amount of Each Disbursement this Period

64.37

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.4863

Amount of Each Disbursement this Period

5.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4866

Amount of Each Disbursement this Period

9.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.4867

Amount of Each Disbursement this Period

9.75

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4862

Amount of Each Disbursement this Period

6.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4868

Amount of Each Disbursement this Period

34.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4869

Amount of Each Disbursement this Period

79.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.4870

Amount of Each Disbursement this Period

21.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4871

Amount of Each Disbursement this Period

30.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4889

Amount of Each Disbursement this Period

33.49

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4891

Amount of Each Disbursement this Period

34.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4892

Amount of Each Disbursement this Period

39.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4886

Amount of Each Disbursement this Period

27.77

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4872

Amount of Each Disbursement this Period

38.05

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4864

Amount of Each Disbursement this Period

3.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4873

Amount of Each Disbursement this Period

10.01

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.4874

Amount of Each Disbursement this Period

240.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4875

Amount of Each Disbursement this Period

26.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4876

Amount of Each Disbursement this Period

44.03

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.4877

Amount of Each Disbursement this Period

5.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.4878

Amount of Each Disbursement this Period

84.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4887

Amount of Each Disbursement this Period

21.17

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.4879

Amount of Each Disbursement this Period

65.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 15 / 2015

Transaction ID : SB23.4880

Amount of Each Disbursement this Period

36.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.4881

Amount of Each Disbursement this Period

27.35

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.4882

Amount of Each Disbursement this Period

27.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.4883

Amount of Each Disbursement this Period

9.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 22 / 2015

Transaction ID : SB23.4884

Amount of Each Disbursement this Period

47.33

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE RD

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.4885

Amount of Each Disbursement this Period

137.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6462

Amount of Each Disbursement this Period

1096.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6463

Amount of Each Disbursement this Period

2883.72

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6464

Amount of Each Disbursement this Period

2893.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6465

Amount of Each Disbursement this Period

2883.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6466

Amount of Each Disbursement this Period

2893.38

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6467

Amount of Each Disbursement this Period

2883.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAUREN FINE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6468

Amount of Each Disbursement this Period

1354.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FIRST INSURANCE**

Mailing Address PO BOX 7000

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4897

Amount of Each Disbursement this Period

2485.26

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2485.26

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FIRST INSURANCE**

Mailing Address PO BOX 7000

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.4898

Amount of Each Disbursement this Period

2609.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD #270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4900

Amount of Each Disbursement this Period

88593.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD #270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

Transaction ID : SB23.4901

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional)..... 141203.38

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW MICHAEL FLUNKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6470

Amount of Each Disbursement this Period

1851.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW MICHAEL FLUNKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6471

Amount of Each Disbursement this Period

955.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FORMSTACK, LLC**

Mailing Address 8604 ALLISONVILLE ROAD, SUITE 300

City State Zip Code  
INDIANAPOLIS IN 46250

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.4903

Amount of Each Disbursement this Period

249.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FORMSTACK, LLC**

Mailing Address 8604 ALLISONVILLE ROAD, SUITE 300

City INDIANAPOLIS State IN Zip Code 46250

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.4904**

Amount of Each Disbursement this Period

249.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FORMSTACK, LLC**

Mailing Address 8604 ALLISONVILLE ROAD, SUITE 300

City INDIANAPOLIS State IN Zip Code 46250

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 06 / 2015

**Transaction ID : SB23.4905**

Amount of Each Disbursement this Period

249.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
DATA PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.4909**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

10000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City  
MIDDLETON

State  
WI

Zip Code  
53562

Purpose of Disbursement  
OFFICE EQUIPMENT PURCHASE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.4911**

Amount of Each Disbursement this Period

15926.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City  
MIDDLETON

State  
WI

Zip Code  
53562

Purpose of Disbursement  
RESEARCH FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.4913**

Amount of Each Disbursement this Period

35000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City  
MIDDLETON

State  
WI

Zip Code  
53562

Purpose of Disbursement  
WEB DEVELOPMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.4914**

Amount of Each Disbursement this Period

6250.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

57176.55

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City  
MIDDLETON

State  
WI

Zip Code  
53562

Purpose of Disbursement  
OFFICE EQUIPMENT PURCHASE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4912

Amount of Each Disbursement this Period

26250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City  
MIDDLETON

State  
WI

Zip Code  
53562

Purpose of Disbursement  
DATA PURCHASE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4910

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF SCOTT WALKER**

Mailing Address PO BOX 620437

City  
MIDDLETON

State  
WI

Zip Code  
53562

Purpose of Disbursement  
WEB DEVELOPMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.4915

Amount of Each Disbursement this Period

6250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

52500.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GADELLNET CONSULTING SERVICES LLC**

Mailing Address 1520 S VANDERVENTER AVENUE

City ST LOUIS State MO Zip Code 63110

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.4917**

Amount of Each Disbursement this Period

3200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GADELLNET CONSULTING SERVICES LLC**

Mailing Address 1520 S VANDERVENTER AVENUE

City ST LOUIS State MO Zip Code 63110

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4918**

Amount of Each Disbursement this Period

10207.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GADELLNET CONSULTING SERVICES LLC**

Mailing Address 1520 S VANDERVENTER AVENUE

City ST LOUIS State MO Zip Code 63110

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

**Transaction ID : SB23.4919**

Amount of Each Disbursement this Period

7985.94

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

21393.10

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GADELLNET CONSULTING SERVICES LLC**

Mailing Address 1520 S VANDERVENTER AVENUE

City ST LOUIS State MO Zip Code 63110

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.4920**

Amount of Each Disbursement this Period

4600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6473**

Amount of Each Disbursement this Period

4049.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6474**

Amount of Each Disbursement this Period

5580.87

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

4600.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6475

Amount of Each Disbursement this Period

5590.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6476

Amount of Each Disbursement this Period

5778.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6477

Amount of Each Disbursement this Period

6353.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6478**

Amount of Each Disbursement this Period

5778.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL JOHN GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6479**

Amount of Each Disbursement this Period

2691.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MIKE GALLAGHER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6939**

Amount of Each Disbursement this Period

202.45

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

202.45

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KIRT GALLATIN**

Mailing Address 1802 PANKRATZ STREET

City  
MADISON

State  
WI

Zip Code  
53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6941

Amount of Each Disbursement this Period

12033.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KIRT GALLATIN**

Mailing Address 1802 PANKRATZ STREET

City  
MADISON

State  
WI

Zip Code  
53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6942

Amount of Each Disbursement this Period

1943.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City  
MILWAUKEE

State  
WI

Zip Code  
53207

Purpose of Disbursement  
WILEY 07/22 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

Transaction ID : SB23.4929

Amount of Each Disbursement this Period

51.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

13976.69

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
WOOD 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4930

Amount of Each Disbursement this Period

14.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
OCZKOWSKI 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.4926

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
PURCELL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4927

Amount of Each Disbursement this Period

26.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
STRONG 9/9 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.4922

Amount of Each Disbursement this Period

56.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
PURCELL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.4928

Amount of Each Disbursement this Period

26.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.4923

Amount of Each Disbursement this Period

60.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
CORNELL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.4924

Amount of Each Disbursement this Period

26.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GENERAL MITCHELL PARKING**

Mailing Address 5300 S HOWELL AVE

City State Zip Code  
MILWAUKEE WI 53207

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.4925

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DAVID GLAUSER**

Mailing Address 2628 HILLSIDE PINES CIRCLE

City State Zip Code  
SALT LAKE CITY UT 84109

Purpose of Disbursement  
GLAUSER 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6481

Amount of Each Disbursement this Period

7.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DAVID GLAUSER**

Mailing Address 2628 HILLSIDE PINES CIRCLE

City SALT LAKE CITY State UT Zip Code 84109

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6943**

Amount of Each Disbursement this Period

708.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DAVID GLAUSER**

Mailing Address 2628 HILLSIDE PINES CIRCLE

City SALT LAKE CITY State UT Zip Code 84109

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6944**

Amount of Each Disbursement this Period

227.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SB23.4932**

Amount of Each Disbursement this Period

681.38

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

936.20

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4934**

Amount of Each Disbursement this Period

8990.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 02 / 2015

**Transaction ID : SB23.4933**

Amount of Each Disbursement this Period

730.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GOOGLE INC.**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.4935**

Amount of Each Disbursement this Period

8990.77

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

17981.54

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LAURA GRALTON**

Mailing Address N60 W39698 MARY LANE

City  
OCONOMOWOC

State  
WI

Zip Code  
53066

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6946

Amount of Each Disbursement this Period

2336.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAURA GRALTON**

Mailing Address N60 W39698 MARY LANE

City  
OCONOMOWOC

State  
WI

Zip Code  
53066

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6947

Amount of Each Disbursement this Period

26801.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GRAND HYATT**

Mailing Address 71 SOUTH WACKER DR

City  
CHICAGO

State  
IL

Zip Code  
60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.4937

Amount of Each Disbursement this Period

1190.01

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

29138.05

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GRAND HYATT**

Mailing Address 71 SOUTH WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4938

Amount of Each Disbursement this Period

530.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GRAND HYATT**

Mailing Address 71 SOUTH WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.4939

Amount of Each Disbursement this Period

621.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. GRAND HYATT**

Mailing Address 71 SOUTH WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.4940

Amount of Each Disbursement this Period

530.02

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GRAND HYATT**

Mailing Address 71 SOUTH WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4941

Amount of Each Disbursement this Period

15.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GREEN BAY PACKERS**

Mailing Address 1265 LOMBARDI AVENUE

City GREEN BAY State WI Zip Code 54304

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 18 / 2015

Transaction ID : SB23.4943

Amount of Each Disbursement this Period

19300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WELLS GRIFFITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6949

Amount of Each Disbursement this Period

1717.21

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

21017.21

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PRESTON WELLS GRIFFITH III**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6483

Amount of Each Disbursement this Period

6414.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PRESTON WELLS GRIFFITH III**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6484

Amount of Each Disbursement this Period

7045.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PRESTON WELLS GRIFFITH III**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6485

Amount of Each Disbursement this Period

7465.39

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PRESTON WELLS GRIFFITH III**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6486

Amount of Each Disbursement this Period

6867.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PRESTON WELLS GRIFFITH III**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6487

Amount of Each Disbursement this Period

6843.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PRESTON WELLS GRIFFITH III**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6488

Amount of Each Disbursement this Period

3161.06

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NATHAN GROTH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6490

Amount of Each Disbursement this Period

771.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NATHAN GROTH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6950

Amount of Each Disbursement this Period

361.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NATHAN GROTH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6491

Amount of Each Disbursement this Period

210.97

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

361.55

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. GROUND GAME STRATEGIES**

Mailing Address 300 HICKORY LANE

City State Zip Code  
MAULDIN SC 29662

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4945

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. GROUND GAME STRATEGIES**

Mailing Address 300 HICKORY LANE

City State Zip Code  
MAULDIN SC 29662

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.4946

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6493

Amount of Each Disbursement this Period

2425.61

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

24000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6494**

Amount of Each Disbursement this Period

2685.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6495**

Amount of Each Disbursement this Period

2661.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6496**

Amount of Each Disbursement this Period

2680.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.6953**

Amount of Each Disbursement this Period

1148.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6497**

Amount of Each Disbursement this Period

2649.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6954**

Amount of Each Disbursement this Period

1368.41

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2516.98

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASHLEY D HAHN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6498**

Amount of Each Disbursement this Period

1225.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW ANDRESS HALL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6500**

Amount of Each Disbursement this Period

8769.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW ANDRESS HALL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6501**

Amount of Each Disbursement this Period

8688.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW ANDRESS HALL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6502

Amount of Each Disbursement this Period

8237.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW ANDRESS HALL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6503

Amount of Each Disbursement this Period

3803.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4948

Amount of Each Disbursement this Period

234.08

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 2222 / 2740

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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)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4949

Amount of Each Disbursement this Period

234.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
STEPHENSON 08/07 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4978

Amount of Each Disbursement this Period

161.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4950

Amount of Each Disbursement this Period

58.11

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4951

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4952

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4953

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4954

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4955

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4956

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4957

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4958

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4959

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## A. HAMPTON INN

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4960

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## B. HAMPTON INN

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4961

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## C. HAMPTON INN

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4962

Amount of Each Disbursement this Period

157.80

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4963

Amount of Each Disbursement this Period

116.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4964

Amount of Each Disbursement this Period

116.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4965

Amount of Each Disbursement this Period

311.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4966

Amount of Each Disbursement this Period

148.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.4967

Amount of Each Disbursement this Period

148.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4968

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4969

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4970

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.4971

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. HAMPTON INN

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 30 2015

Transaction ID : SB23.4972

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. HAMPTON INN

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 30 2015

Transaction ID : SB23.4973

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. HAMPTON INN

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 30 2015

Transaction ID : SB23.4974

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 30 2015

Transaction ID : SB23.4975

Amount of Each Disbursement this Period

274.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 09 2015

Transaction ID : SB23.4976

Amount of Each Disbursement this Period

148.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HAMPTON INN**

Mailing Address 7930 JONES BRANCH DR

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 09 2015

Transaction ID : SB23.4977

Amount of Each Disbursement this Period

160.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6505

Amount of Each Disbursement this Period

1338.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6506

Amount of Each Disbursement this Period

1835.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6507

Amount of Each Disbursement this Period

1826.19

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6508

Amount of Each Disbursement this Period

1835.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6509

Amount of Each Disbursement this Period

1826.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6957

Amount of Each Disbursement this Period

1210.58

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1210.58

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALEC J HANNA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6510**

Amount of Each Disbursement this Period

841.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HAPPY JOES**

Mailing Address 855 CENTURY DRIVE

City State Zip Code  
DUBUQUE IA 52001

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

**Transaction ID : SB23.4980**

Amount of Each Disbursement this Period

650.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HARBINGER LLC**

Mailing Address 1919 M STREET NW #200

City State Zip Code  
WASHINGTON DC 20036

Purpose of Disbursement  
EVENT PRODUCTION CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4983**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

15000.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HARBINGER LLC**

Mailing Address 1919 M STREET NW #200

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
EVENT PRODUCTION CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.4984**

Amount of Each Disbursement this Period

53150.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HARBINGER LLC**

Mailing Address 1919 M STREET NW #200

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
EVENT PRODUCTION CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

**Transaction ID : SB23.4985**

Amount of Each Disbursement this Period

21175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HARBINGER LLC**

Mailing Address 1919 M STREET NW #200

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
EVENT PRODUCTION CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.4986**

Amount of Each Disbursement this Period

37500.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

111825.58

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HARBINGER LLC**

Mailing Address 1919 M STREET NW #200

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
CAMPAIGN PROMOTIONAL ITEMS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.4982**

Amount of Each Disbursement this Period

16600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HASSEL WEEMS PHOTOGRAPHY**

Mailing Address PO BOX 141

City  
LOCUST GROVE

State  
GA

Zip Code  
30248

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.4988**

Amount of Each Disbursement this Period

365.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TIM HERSHNER**

Mailing Address 1330 S FAIR STREET #418

City  
ARLINGTON

State  
VA

Zip Code  
22202

Purpose of Disbursement  
HERSHNER 08/07 REIMBURSEMENT: TRAVEL: PER DIEM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6512**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

16965.56

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TIM HERSHNER**

Mailing Address 1330 S FAIR STREET #418

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
HERSHNER 08/07 REIMBURSEMENT: TRAVEL: PER DIEM

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SB23.6513**

Amount of Each Disbursement this Period

4.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALY HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6515**

Amount of Each Disbursement this Period

162.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALY HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6959**

Amount of Each Disbursement this Period

1951.37

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1951.37

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALY HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

Transaction ID : SB23.6516

Amount of Each Disbursement this Period

46.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALY HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6960

Amount of Each Disbursement this Period

659.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALY HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6961

Amount of Each Disbursement this Period

1184.16

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1843.36

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALY HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6962

Amount of Each Disbursement this Period

1282.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6518

Amount of Each Disbursement this Period

3359.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6519

Amount of Each Disbursement this Period

3692.95

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

1282.27

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6520

Amount of Each Disbursement this Period

3702.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6521

Amount of Each Disbursement this Period

3692.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6522

Amount of Each Disbursement this Period

3702.61

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6523

Amount of Each Disbursement this Period

3692.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALYSON J HIGGINS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6524

Amount of Each Disbursement this Period

1728.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6526

Amount of Each Disbursement this Period

1400.72

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6527

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6528

Amount of Each Disbursement this Period

1544.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6529

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6530**

Amount of Each Disbursement this Period

1544.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6531**

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASHLEY ELIZABETH HIGHLANDER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6532**

Amount of Each Disbursement this Period

732.13

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HIGH OUTPUT INC.**

Mailing Address 495 TURNPIKE STREET

City  
CANTON

State  
MA

Zip Code  
02021

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.4990

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City  
MCLEAN

State  
VA

Zip Code  
22102

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.4992

Amount of Each Disbursement this Period

321.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City  
MCLEAN

State  
VA

Zip Code  
22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.4994

Amount of Each Disbursement this Period

97.57

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

2700.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.4995

Amount of Each Disbursement this Period

585.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4996

Amount of Each Disbursement this Period

172.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.4997

Amount of Each Disbursement this Period

3853.46

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5023

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.4998

Amount of Each Disbursement this Period

534.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.4999

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.5000

Amount of Each Disbursement this Period

155.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.5003

Amount of Each Disbursement this Period

206.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 26 / 2015

Transaction ID : SB23.5004

Amount of Each Disbursement this Period

233.58

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5005

Amount of Each Disbursement this Period

73.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5006

Amount of Each Disbursement this Period

243.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5007

Amount of Each Disbursement this Period

243.28

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5008

Amount of Each Disbursement this Period

231.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5009

Amount of Each Disbursement this Period

231.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5002

Amount of Each Disbursement this Period

468.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5001

Amount of Each Disbursement this Period

350.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5010

Amount of Each Disbursement this Period

88.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5011

Amount of Each Disbursement this Period

6945.96

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5012

Amount of Each Disbursement this Period

632.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.5013

Amount of Each Disbursement this Period

300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5014

Amount of Each Disbursement this Period

250.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5018

Amount of Each Disbursement this Period

124.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5019

Amount of Each Disbursement this Period

18.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.5015

Amount of Each Disbursement this Period

7560.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

**Transaction ID : SB23.5020**

Amount of Each Disbursement this Period

19.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

**Transaction ID : SB23.5021**

Amount of Each Disbursement this Period

15.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.5016**

Amount of Each Disbursement this Period

120.99

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

Transaction ID : SB23.5017

Amount of Each Disbursement this Period

120.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 12 / 2015

Transaction ID : SB23.4993

Amount of Each Disbursement this Period

2.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HILTON**

Mailing Address 7930 JONES BRANCH DRIVE SUITE 1100

City State Zip Code  
MCLEAN VA 22102

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 12 / 2015

Transaction ID : SB23.5022

Amount of Each Disbursement this Period

11.65

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB23.5025

Amount of Each Disbursement this Period

386.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5026

Amount of Each Disbursement this Period

139.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5027

Amount of Each Disbursement this Period

146.72

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5028

Amount of Each Disbursement this Period

139.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5029

Amount of Each Disbursement this Period

139.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5030

Amount of Each Disbursement this Period

257.58

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5031

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5032

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5033

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

**Transaction ID : SB23.5034**

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

**Transaction ID : SB23.5035**

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

**Transaction ID : SB23.5036**

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5037

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5038

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5039

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5040

Amount of Each Disbursement this Period

128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.5042

Amount of Each Disbursement this Period

124.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HOLIDAY INN**

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement  
KAYE 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5041

Amount of Each Disbursement this Period

145.59

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HYATT PLACE**

Mailing Address 71 SOUTH WACKER DR  
12TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
EVENSON 07/22 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 27 / 2015

Transaction ID : SB23.5063

Amount of Each Disbursement this Period

35.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HYATT PLACE**

Mailing Address 71 SOUTH WACKER DR  
12TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5058

Amount of Each Disbursement this Period

167.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HYATT PLACE**

Mailing Address 71 SOUTH WACKER DR  
12TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5059

Amount of Each Disbursement this Period

167.18

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HYATT PLACE**

Mailing Address 71 SOUTH WACKER DR  
12TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5060

Amount of Each Disbursement this Period

167.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HYATT PLACE**

Mailing Address 71 SOUTH WACKER DR  
12TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5061

Amount of Each Disbursement this Period

167.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HYATT PLACE**

Mailing Address 71 SOUTH WACKER DR  
12TH FLOOR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.5062

Amount of Each Disbursement this Period

334.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HYATT REGENCY**

Mailing Address 650 15TH ST

City  
DENVER

State  
CO

Zip Code  
80202

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 27 / 2015

Transaction ID : SB23.5065

Amount of Each Disbursement this Period

6.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City  
DES MOINES

State  
IA

Zip Code  
50266

Purpose of Disbursement  
HAHN 9/9 REIMBURSEMENT: MEETING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2014

Transaction ID : SB23.5056

Amount of Each Disbursement this Period

228.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City  
DES MOINES

State  
IA

Zip Code  
50266

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5045

Amount of Each Disbursement this Period

32.84

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5046

Amount of Each Disbursement this Period

92.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5047

Amount of Each Disbursement this Period

3.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5050

Amount of Each Disbursement this Period

43.13

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5051

Amount of Each Disbursement this Period

64.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.5048

Amount of Each Disbursement this Period

76.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5044

Amount of Each Disbursement this Period

98.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

Transaction ID : SB23.5049

Amount of Each Disbursement this Period

50.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
NEITZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5052

Amount of Each Disbursement this Period

35.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

Transaction ID : SB23.5054

Amount of Each Disbursement this Period

17.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

Transaction ID : SB23.5055

Amount of Each Disbursement this Period

7500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HY VEE**

Mailing Address 5820 WESTOWN PKWY W

City State Zip Code  
DES MOINES IA 50266

Purpose of Disbursement  
WETZEL 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 20 / 2015

Transaction ID : SB23.5053

Amount of Each Disbursement this Period

32.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. I360 LLC**

Mailing Address PO BOX 37046

City State Zip Code  
BALTIMORE MD 21297

Purpose of Disbursement  
SOFTWARE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5067

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

7500.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. I360 LLC**

Mailing Address PO BOX 37046

City State Zip Code  
BALTIMORE MD 21297

Purpose of Disbursement  
SOFTWARE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5068**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. IMAGEACTIVE**

Mailing Address 4191 STANSBURY AVENUE

City State Zip Code  
SHERMAN OAKS CA 91423

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.5070**

Amount of Each Disbursement this Period

931.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City State Zip Code  
KINGWOOD TX 77339

Purpose of Disbursement  
INSPERITY 06/30 PAYROLL SERVICES/TAXES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.5072**

Amount of Each Disbursement this Period

2758.60

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

8431.69

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.5075**

Amount of Each Disbursement this Period

133435.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.5076**

Amount of Each Disbursement this Period

279156.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

**Transaction ID : SB23.5077**

Amount of Each Disbursement this Period

308411.52

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

721004.07

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL SERVICES/TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.5073

Amount of Each Disbursement this Period

930.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.5078

Amount of Each Disbursement this Period

340505.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5079

Amount of Each Disbursement this Period

340074.08

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

680579.52

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City State Zip Code  
KINGWOOD TX 77339

Purpose of Disbursement  
INSPERITY 09/14 PMT: PAYROLL SERVICES/TAXES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.5074**

Amount of Each Disbursement this Period

1777.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City State Zip Code  
KINGWOOD TX 77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.5080**

Amount of Each Disbursement this Period

343868.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City State Zip Code  
KINGWOOD TX 77339

Purpose of Disbursement  
PAYROLL: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.5081**

Amount of Each Disbursement this Period

178619.16

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

522487.42

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. INTUIT**

Mailing Address 2700 COAST AVE

City State Zip Code  
MOUNTAIN VIEW CA 94043

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5083

Amount of Each Disbursement this Period

210.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. IRS**

Mailing Address PO BOX 802501

City State Zip Code  
CINCINNATI OH 45280

Purpose of Disbursement  
RESEARCH FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5085

Amount of Each Disbursement this Period

1400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ISTREAM FINANCIAL SERVICES**

Mailing Address 13555 BISHOPS COURT

City State Zip Code  
BROOKFIELD WI 53005

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5088

Amount of Each Disbursement this Period

1446.05

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2846.05

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ISTREAM FINANCIAL SERVICES**

Mailing Address 13555 BISHOPS COURT

City State Zip Code  
**BROOKFIELD WI 53005**

Purpose of Disbursement  
**BANK FEES**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

**Transaction ID : SB23.5089**

Amount of Each Disbursement this Period

3018.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
**MADISON WI 53704**

Purpose of Disbursement  
**INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6534**

Amount of Each Disbursement this Period

4211.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
**MADISON WI 53704**

Purpose of Disbursement  
**INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6535**

Amount of Each Disbursement this Period

5792.33

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

3018.15

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6536**

Amount of Each Disbursement this Period

6449.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6537**

Amount of Each Disbursement this Period

6023.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6538**

Amount of Each Disbursement this Period

4266.09

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6539**

Amount of Each Disbursement this Period

4241.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KRISTIN JACKSON**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6540**

Amount of Each Disbursement this Period

1983.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL B JACOBS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6542**

Amount of Each Disbursement this Period

745.43

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL B JACOBS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6543

Amount of Each Disbursement this Period

776.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL B JACOBS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6544

Amount of Each Disbursement this Period

771.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL B JACOBS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6545

Amount of Each Disbursement this Period

776.85

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL B JACOBS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6546

Amount of Each Disbursement this Period

1079.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MICHAEL B JACOBS**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6547

Amount of Each Disbursement this Period

499.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 337 CROOK AVE

City State Zip Code  
HENDERSON TN 38340

Purpose of Disbursement  
SMITH 08/07 REIMBURSEMENT: PER DIEM

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.5091

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

**Transaction ID : SB23.5092**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.5093**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SB23.5094**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

**Transaction ID : SB23.5095**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.5096**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5097**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

**Transaction ID : SB23.5098**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

**Transaction ID : SB23.5099**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 337 CROOK AVE

City  
**HENDERSON**

State  
**TN**

Zip Code  
**38340**

Purpose of Disbursement  
**SMITH 08/07 REIMBURSEMENT: PER DIEM**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.5100**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JETBLUE**

Mailing Address 118-29 QUEENS BLVD

City State Zip Code  
FOREST HILLS NY 11375

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SB23.5104**

Amount of Each Disbursement this Period

138.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JETBLUE**

Mailing Address 118-29 QUEENS BLVD

City State Zip Code  
FOREST HILLS NY 11375

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.5102**

Amount of Each Disbursement this Period

98.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JETBLUE**

Mailing Address 118-29 QUEENS BLVD

City State Zip Code  
FOREST HILLS NY 11375

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.5103**

Amount of Each Disbursement this Period

166.10

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PATRICK JOHNSON**

Mailing Address 1436 RIDGEFIELD DRIVE

City State Zip Code  
DES PERES MO 63131

Purpose of Disbursement  
JOHNSON 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.6549

Amount of Each Disbursement this Period

12.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONES DAY**

Mailing Address PO BOX 7805, BEN FRANKLIN STATION

City State Zip Code  
WASHINGTON DC 20044

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.5106

Amount of Each Disbursement this Period

49427.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JUST WIN STRATEGIES**

Mailing Address PO BOX 2561

City State Zip Code  
ALEXANDRIA VA 22301

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5108

Amount of Each Disbursement this Period

9148.44

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

58576.18

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JUST WIN STRATEGIES**

Mailing Address PO BOX 2561

City  
**ALEXANDRIA**

State  
**VA**

Zip Code  
**22301**

Purpose of Disbursement  
**FIELD CONSULTING**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.5109**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEFF KAYE**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**REIMBURSEMENT: SEE MEMO ENTRIES**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.6967**

Amount of Each Disbursement this Period

913.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEFF KAYE**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**REIMBURSEMENT: SEE MEMO ENTRIES**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6968**

Amount of Each Disbursement this Period

771.12

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

9184.93

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEFFREY C KAYE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6551

Amount of Each Disbursement this Period

4269.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEFFREY C KAYE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6552

Amount of Each Disbursement this Period

4716.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEFFREY C KAYE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6553

Amount of Each Disbursement this Period

4670.12

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEFFREY C KAYE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6554**

Amount of Each Disbursement this Period

4650.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEFFREY C KAYE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6555**

Amount of Each Disbursement this Period

4415.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEFFREY C KAYE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6556**

Amount of Each Disbursement this Period

2040.65

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6558

Amount of Each Disbursement this Period

3849.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6559

Amount of Each Disbursement this Period

4232.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6560

Amount of Each Disbursement this Period

4242.12

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6561

Amount of Each Disbursement this Period

4456.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6562

Amount of Each Disbursement this Period

5154.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6563

Amount of Each Disbursement this Period

4456.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LAUREN E KIRSHNER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6564**

Amount of Each Disbursement this Period

2082.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT KLUG**

Mailing Address 4311 WINNEQUAH ROAD

City State Zip Code  
MONONA WI 53716

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6970**

Amount of Each Disbursement this Period

500.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KATHRYN MARY KOTOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6566**

Amount of Each Disbursement this Period

933.32

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

500.10

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KATHRYN MARY KOTOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6567**

Amount of Each Disbursement this Period

733.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6569**

Amount of Each Disbursement this Period

7383.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6570**

Amount of Each Disbursement this Period

8967.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6571**

Amount of Each Disbursement this Period

8976.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6572**

Amount of Each Disbursement this Period

9191.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6573**

Amount of Each Disbursement this Period

9874.50

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6574**

Amount of Each Disbursement this Period

9191.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. KIRSTEN A KUKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6575**

Amount of Each Disbursement this Period

4429.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
SMITH 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.5114**

Amount of Each Disbursement this Period

46.37

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
STEPHENSON 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5117

Amount of Each Disbursement this Period

125.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
STEPHENSON 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5118

Amount of Each Disbursement this Period

16.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5111

Amount of Each Disbursement this Period

19.74

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.5112

Amount of Each Disbursement this Period

12.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5113

Amount of Each Disbursement this Period

14.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
SMITH 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5115

Amount of Each Disbursement this Period

24.30

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KUM & GO**

Mailing Address 6400 WESTOWN PKWY

City State Zip Code  
WEST DES MOINES IA 50266

Purpose of Disbursement  
SMITH 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

**Transaction ID : SB23.5116**

Amount of Each Disbursement this Period

24.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THEODORE JOHN KWONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6577**

Amount of Each Disbursement this Period

4059.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THEODORE JOHN KWONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6578**

Amount of Each Disbursement this Period

4939.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THEODORE JOHN KWONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6579**

Amount of Each Disbursement this Period

4677.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THEODORE JOHN KWONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6580**

Amount of Each Disbursement this Period

4657.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THEODORE JOHN KWONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6581**

Amount of Each Disbursement this Period

4422.40

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THEODORE JOHN KWONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6582

Amount of Each Disbursement this Period

2043.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMY LEEDECKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6584

Amount of Each Disbursement this Period

5063.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMY LEEDECKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6585

Amount of Each Disbursement this Period

6860.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMY LEEDECKE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6586

Amount of Each Disbursement this Period

7314.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. AMY LEEDECKE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6587

Amount of Each Disbursement this Period

6687.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. AMY LEEDECKE**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6588

Amount of Each Disbursement this Period

6663.37

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. AMY LEEDECKE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6589

Amount of Each Disbursement this Period

3078.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LENOVO GROUP**

Mailing Address 1009 THINK PLACE

City State Zip Code  
MORRISVILLE NC 27560

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: COMPUTER PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.5120

Amount of Each Disbursement this Period

737.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LENOVO GROUP**

Mailing Address 1009 THINK PLACE

City State Zip Code  
MORRISVILLE NC 27560

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: COMPUTER PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5121

Amount of Each Disbursement this Period

1263.89

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SHANE LESKO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6591

Amount of Each Disbursement this Period

2672.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SHANE LESKO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6592

Amount of Each Disbursement this Period

866.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LEXIS NEXIS**

Mailing Address PO BOX 2314

City State Zip Code  
CAROL STREAM IL 60132

Purpose of Disbursement  
RESEARCH FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5123

Amount of Each Disbursement this Period

496.41

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

496.41

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LG STRATEGIES LLC**

Mailing Address 69 BIRON STREET

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 23 / 2015

**Transaction ID : SB23.5125**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LILLY & COMPANY**

Mailing Address 1005 CONGRESS AVE #910

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.5127**

Amount of Each Disbursement this Period

3790.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LILLY & COMPANY**

Mailing Address 1005 CONGRESS AVE #910

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5128**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

18790.59

**Total This Period (last page this line number only)**.....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6594**

Amount of Each Disbursement this Period

7615.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6595**

Amount of Each Disbursement this Period

8344.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6596**

Amount of Each Disbursement this Period

8368.78

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6597

Amount of Each Disbursement this Period

8344.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6598

Amount of Each Disbursement this Period

8368.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6599

Amount of Each Disbursement this Period

8344.17

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KATHRYN M LIND**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6600

Amount of Each Disbursement this Period

8344.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KIM LINEHAN**

Mailing Address 1515 FOX RIDGE COURT

City DE PERE State WI Zip Code 54115

Purpose of Disbursement  
IN-KIND: CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

Transaction ID : SB23.7057

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LOCKTON AFFINITY LLC**

Mailing Address PO BOX 410679

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.5130

Amount of Each Disbursement this Period

13480.30

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

16180.30

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6602

Amount of Each Disbursement this Period

3645.05

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6603

Amount of Each Disbursement this Period

4007.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6604

Amount of Each Disbursement this Period

4017.32

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6605**

Amount of Each Disbursement this Period

4238.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6606**

Amount of Each Disbursement this Period

4957.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6607**

Amount of Each Disbursement this Period

4238.96

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JUSTIN LOFRANCO**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6608

Amount of Each Disbursement this Period

1981.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LOGGLY, INC**

Mailing Address 1 POST ST, STE 400

City State Zip Code  
SAN FRANCISCO CA 94104

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5132

Amount of Each Disbursement this Period

109.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. LOGGLY, INC**

Mailing Address 1 POST ST, STE 400

City State Zip Code  
SAN FRANCISCO CA 94104

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5133

Amount of Each Disbursement this Period

109.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. LOTAME SOLUTIONS INC.**

Mailing Address 8850 STANFORD BLVD #2000

City State Zip Code  
COLUMBIA MD 21045

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.5135**

Amount of Each Disbursement this Period

4597.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LUCKY FOOLS PUB**

Mailing Address 75 E HIGH STREET

City State Zip Code  
MOORPARK CA 93021

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2015

**Transaction ID : SB23.5137**

Amount of Each Disbursement this Period

266.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6610**

Amount of Each Disbursement this Period

3640.80

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

4597.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6611

Amount of Each Disbursement this Period

4464.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6612

Amount of Each Disbursement this Period

4214.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6613

Amount of Each Disbursement this Period

4235.66

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6971

Amount of Each Disbursement this Period

1198.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6614

Amount of Each Disbursement this Period

4045.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6972

Amount of Each Disbursement this Period

248.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1446.33

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MICHAEL A LUKACH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6615

Amount of Each Disbursement this Period

1960.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. VICKI MACK**

Mailing Address

City State Zip Code

Purpose of Disbursement  
EVENT CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6974

Amount of Each Disbursement this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MADISON STRATEGIES LLC**

Mailing Address 7212 WEATHERVANE ROAD

City State Zip Code  
FLOWERY BRANCH GA 30542

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5139

Amount of Each Disbursement this Period

10511.69

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

10861.69

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MADISON STRATEGIES LLC**

Mailing Address 7212 WEATHERVANE ROAD

City State Zip Code  
FLOWERY BRANCH GA 30542

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5140**

Amount of Each Disbursement this Period

11138.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MAJIC PRODUCTIONS INC.**

Mailing Address 21365 GATEWAY COURT  
#100

City State Zip Code  
BROOKFIELD WI 53045

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5141**

Amount of Each Disbursement this Period

10214.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MAJIC PRODUCTIONS INC.**

Mailing Address 21365 GATEWAY COURT  
#100

City State Zip Code  
BROOKFIELD WI 53045

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5142**

Amount of Each Disbursement this Period

5736.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional)..... 27088.96

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.5185

Amount of Each Disbursement this Period

750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 07/22 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.5188

Amount of Each Disbursement this Period

248.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5173

Amount of Each Disbursement this Period

244.85

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5186

Amount of Each Disbursement this Period

4698.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5146

Amount of Each Disbursement this Period

201.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5182

Amount of Each Disbursement this Period

2.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5147

Amount of Each Disbursement this Period

3715.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5148

Amount of Each Disbursement this Period

4000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5149

Amount of Each Disbursement this Period

201.48

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SB23.5150**

Amount of Each Disbursement this Period

201.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

**Transaction ID : SB23.5155**

Amount of Each Disbursement this Period

3109.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

**Transaction ID : SB23.5181**

Amount of Each Disbursement this Period

90.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 26 / 2015

Transaction ID : SB23.5156

Amount of Each Disbursement this Period

263.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5151

Amount of Each Disbursement this Period

133.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5152

Amount of Each Disbursement this Period

134.28

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5153

Amount of Each Disbursement this Period

134.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5157

Amount of Each Disbursement this Period

134.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5158

Amount of Each Disbursement this Period

134.28

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5159

Amount of Each Disbursement this Period

134.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5160

Amount of Each Disbursement this Period

134.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5161

Amount of Each Disbursement this Period

4.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5162

Amount of Each Disbursement this Period

345.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5163

Amount of Each Disbursement this Period

345.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 08/25 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.5189

Amount of Each Disbursement this Period

177.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5154

Amount of Each Disbursement this Period

-1269.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 08/25 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5190

Amount of Each Disbursement this Period

209.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 08/25 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 02 / 2015

Transaction ID : SB23.5191

Amount of Each Disbursement this Period

302.84

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 2321 / 2740

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5175

Amount of Each Disbursement this Period

12.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5176

Amount of Each Disbursement this Period

5.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5177

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2322 / 2740

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

Transaction ID : SB23.5174

Amount of Each Disbursement this Period

60.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

Transaction ID : SB23.5183

Amount of Each Disbursement this Period

6.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER/TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

Transaction ID : SB23.5184

Amount of Each Disbursement this Period

56.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

Transaction ID : SB23.5164

Amount of Each Disbursement this Period

168.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5165

Amount of Each Disbursement this Period

2427.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5166

Amount of Each Disbursement this Period

279.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5167

Amount of Each Disbursement this Period

279.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5168

Amount of Each Disbursement this Period

279.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5169

Amount of Each Disbursement this Period

2726.24

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WACLAWSKI 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 15 / 2015

Transaction ID : SB23.5187

Amount of Each Disbursement this Period

208.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.5192

Amount of Each Disbursement this Period

7.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.5193

Amount of Each Disbursement this Period

5.70

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.5195

Amount of Each Disbursement this Period

114.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5194

Amount of Each Disbursement this Period

18.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5196

Amount of Each Disbursement this Period

135.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5197

Amount of Each Disbursement this Period

34.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5170

Amount of Each Disbursement this Period

2113.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5171

Amount of Each Disbursement this Period

8198.47

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 22 / 2015

Transaction ID : SB23.5172

Amount of Each Disbursement this Period

2536.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.5178

Amount of Each Disbursement this Period

21.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5179

Amount of Each Disbursement this Period

6.52

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5180

Amount of Each Disbursement this Period

5.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.5144

Amount of Each Disbursement this Period

18.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

Transaction ID : SB23.5145

Amount of Each Disbursement this Period

25.44

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MARTIN 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 29 / 2015

**Transaction ID : SB23.6623**

Amount of Each Disbursement this Period

19.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MARTIN 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

**Transaction ID : SB23.6624**

Amount of Each Disbursement this Period

24.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6617**

Amount of Each Disbursement this Period

2399.15

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MARTIN 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.6625

Amount of Each Disbursement this Period

25.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6618

Amount of Each Disbursement this Period

2656.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.6975

Amount of Each Disbursement this Period

360.08

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

360.08

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6619**

Amount of Each Disbursement this Period

2632.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6620**

Amount of Each Disbursement this Period

2651.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.6976**

Amount of Each Disbursement this Period

420.09

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

420.09

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6621

Amount of Each Disbursement this Period

2620.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6977

Amount of Each Disbursement this Period

134.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KAREN MARTIN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6622

Amount of Each Disbursement this Period

1324.82

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

134.90

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW C MASON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6627**

Amount of Each Disbursement this Period

10587.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW C MASON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6628**

Amount of Each Disbursement this Period

11727.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW C MASON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6629**

Amount of Each Disbursement this Period

11159.14

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MATTHEW C MASON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6630**

Amount of Each Disbursement this Period

11183.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEW C MASON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6631**

Amount of Each Disbursement this Period

11159.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEW C MASON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6632**

Amount of Each Disbursement this Period

5272.54

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6634

Amount of Each Disbursement this Period

3111.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.6640

Amount of Each Disbursement this Period

53.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6641

Amount of Each Disbursement this Period

47.52

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6642**

Amount of Each Disbursement this Period

18.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6643**

Amount of Each Disbursement this Period

18.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SB23.6644**

Amount of Each Disbursement this Period

23.76

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.6645

Amount of Each Disbursement this Period

4.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.6646

Amount of Each Disbursement this Period

71.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.6647

Amount of Each Disbursement this Period

66.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.6648

Amount of Each Disbursement this Period

66.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.6649

Amount of Each Disbursement this Period

66.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.6650

Amount of Each Disbursement this Period

66.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6635

Amount of Each Disbursement this Period

4237.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.6978

Amount of Each Disbursement this Period

1652.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6636

Amount of Each Disbursement this Period

4825.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

1652.25

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6637**

Amount of Each Disbursement this Period

4455.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6638**

Amount of Each Disbursement this Period

4242.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6979**

Amount of Each Disbursement this Period

989.34

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

989.34

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCOTT MATEJOV**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6639**

Amount of Each Disbursement this Period

1936.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MAVERICK FINANCE**

Mailing Address 403 N SECOND STREET, 2ND FL

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5199**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MBA INSURANCE**

Mailing Address 8383 E EVANS RD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.5201**

Amount of Each Disbursement this Period

847.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

2000.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MIKE MCGINNIS**

Mailing Address 171 N 67TH STREET

City State Zip Code  
MILWAUKEE WI 53213

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6981**

Amount of Each Disbursement this Period

515.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KARA MCKEE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6652**

Amount of Each Disbursement this Period

3257.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KARA MCKEE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6653**

Amount of Each Disbursement this Period

3276.96

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

515.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KARA MCKEE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6654

Amount of Each Disbursement this Period

3933.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KARA MCKEE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6655

Amount of Each Disbursement this Period

3500.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KARA MCKEE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6656

Amount of Each Disbursement this Period

3475.45

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KARA MCKEE**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6657

Amount of Each Disbursement this Period

1552.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MELTWATER NEWS US INC.**

Mailing Address DEPT 3408, PO BOX 123408

City State Zip Code  
DALLAS TX 75312

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5203

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. METCALFE'S**

Mailing Address 726 N MIDVALE BLVD

City State Zip Code  
MADISON WI 53705

Purpose of Disbursement  
SCHMIDT 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5205

Amount of Each Disbursement this Period

313.11

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MG&E**

Mailing Address PO BOX 1231

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5207

Amount of Each Disbursement this Period

4787.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MG&E**

Mailing Address PO BOX 1231

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.5208

Amount of Each Disbursement this Period

5274.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MICROSOFT ONLINE INC.**

Mailing Address PO BOX 847543

City DALLAS State TX Zip Code 75284

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5210

Amount of Each Disbursement this Period

7399.38

☐ Memo Item

Subtotal Of Receipts This Page (optional)..... 17461.44

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MIDAMERICAN ENERGY COMPANY**

Mailing Address PO BOX 8020

City  
**DAVENPORT**

State  
**IA**

Zip Code  
**52808**

Purpose of Disbursement  
**UTILITIES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5212**

Amount of Each Disbursement this Period

568.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
**WETZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

**Transaction ID : SB23.5349**

Amount of Each Disbursement this Period

39.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
**WETZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.5350**

Amount of Each Disbursement this Period

39.93

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

568.86

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
WETZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.5351**

Amount of Each Disbursement this Period

39.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
HAHN 9/9 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.5355**

Amount of Each Disbursement this Period

539.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 9/9 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

**Transaction ID : SB23.5356**

Amount of Each Disbursement this Period

226.35

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

MARTIN 9/3 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.5354**

Amount of Each Disbursement this Period

420.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

NAIDU 9/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

**Transaction ID : SB23.5353**

Amount of Each Disbursement this Period

170.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5214**

Amount of Each Disbursement this Period

91.28

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5215**

Amount of Each Disbursement this Period

45.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5216**

Amount of Each Disbursement this Period

17.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5217**

Amount of Each Disbursement this Period

17.13

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5218**

Amount of Each Disbursement this Period

44.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5219**

Amount of Each Disbursement this Period

52.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5220**

Amount of Each Disbursement this Period

52.07

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5221**

Amount of Each Disbursement this Period

16.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5222**

Amount of Each Disbursement this Period

47.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5223**

Amount of Each Disbursement this Period

98.24

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5224**

Amount of Each Disbursement this Period

142.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5225**

Amount of Each Disbursement this Period

183.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5226**

Amount of Each Disbursement this Period

90.55

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5227**

Amount of Each Disbursement this Period

109.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5228**

Amount of Each Disbursement this Period

143.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5229**

Amount of Each Disbursement this Period

110.25

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5230**

Amount of Each Disbursement this Period

85.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5231**

Amount of Each Disbursement this Period

102.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5232**

Amount of Each Disbursement this Period

102.43

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2356 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5233**

Amount of Each Disbursement this Period

102.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5234**

Amount of Each Disbursement this Period

107.05

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5235**

Amount of Each Disbursement this Period

123.88

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5236**

Amount of Each Disbursement this Period

106.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5237**

Amount of Each Disbursement this Period

118.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5238**

Amount of Each Disbursement this Period

340.66

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 2358 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5239**

Amount of Each Disbursement this Period

2.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5240**

Amount of Each Disbursement this Period

28.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5241**

Amount of Each Disbursement this Period

11.42

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 2359 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5242**

Amount of Each Disbursement this Period

23.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5243**

Amount of Each Disbursement this Period

65.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5244**

Amount of Each Disbursement this Period

52.40

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5245**

Amount of Each Disbursement this Period

107.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5246**

Amount of Each Disbursement this Period

19.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5247**

Amount of Each Disbursement this Period

11.52

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2361 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5248**

Amount of Each Disbursement this Period

11.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5249**

Amount of Each Disbursement this Period

10.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CORNELL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5250**

Amount of Each Disbursement this Period

55.84

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2362 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5251**

Amount of Each Disbursement this Period

74.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5252**

Amount of Each Disbursement this Period

46.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5253**

Amount of Each Disbursement this Period

75.77

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5254**

Amount of Each Disbursement this Period

55.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5255**

Amount of Each Disbursement this Period

79.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5256**

Amount of Each Disbursement this Period

45.31

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5257**

Amount of Each Disbursement this Period

90.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5258**

Amount of Each Disbursement this Period

41.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5259**

Amount of Each Disbursement this Period

72.63

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5260**

Amount of Each Disbursement this Period

72.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5261**

Amount of Each Disbursement this Period

95.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5262**

Amount of Each Disbursement this Period

6.07

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5263

Amount of Each Disbursement this Period

36.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5264

Amount of Each Disbursement this Period

27.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5265

Amount of Each Disbursement this Period

66.69

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
DAY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5266**

Amount of Each Disbursement this Period

89.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
DWYER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5267**

Amount of Each Disbursement this Period

51.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
DWYER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5268**

Amount of Each Disbursement this Period

62.60

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
DWYER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5269**

Amount of Each Disbursement this Period

12.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
DWYER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5270**

Amount of Each Disbursement this Period

41.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
EAGER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5271**

Amount of Each Disbursement this Period

81.94

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5272**

Amount of Each Disbursement this Period

27.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5273**

Amount of Each Disbursement this Period

27.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5274**

Amount of Each Disbursement this Period

102.10

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5275

Amount of Each Disbursement this Period

46.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5276

Amount of Each Disbursement this Period

46.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5277

Amount of Each Disbursement this Period

62.67

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5278**

Amount of Each Disbursement this Period

44.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5279**

Amount of Each Disbursement this Period

93.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5280**

Amount of Each Disbursement this Period

42.83

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. MILEAGE

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5281

Amount of Each Disbursement this Period

41.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. MILEAGE

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5282

Amount of Each Disbursement this Period

284.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. MILEAGE

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5283

Amount of Each Disbursement this Period

70.62

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5284**

Amount of Each Disbursement this Period

153.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5285**

Amount of Each Disbursement this Period

174.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5286**

Amount of Each Disbursement this Period

208.56

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HAHN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5287**

Amount of Each Disbursement this Period

33.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5288**

Amount of Each Disbursement this Period

55.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5289**

Amount of Each Disbursement this Period

106.99

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5290**

Amount of Each Disbursement this Period

55.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5291**

Amount of Each Disbursement this Period

53.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5292**

Amount of Each Disbursement this Period

27.52

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5293**

Amount of Each Disbursement this Period

65.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5294**

Amount of Each Disbursement this Period

76.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5295**

Amount of Each Disbursement this Period

27.06

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5296**

Amount of Each Disbursement this Period

46.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5297**

Amount of Each Disbursement this Period

71.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5298**

Amount of Each Disbursement this Period

26.86

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5299**

Amount of Each Disbursement this Period

79.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5300**

Amount of Each Disbursement this Period

93.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5301**

Amount of Each Disbursement this Period

75.83

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5302**

Amount of Each Disbursement this Period

75.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5303**

Amount of Each Disbursement this Period

21.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5304**

Amount of Each Disbursement this Period

60.59

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5305**

Amount of Each Disbursement this Period

25.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5306**

Amount of Each Disbursement this Period

54.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5307**

Amount of Each Disbursement this Period

81.18

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5308**

Amount of Each Disbursement this Period

62.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5309**

Amount of Each Disbursement this Period

29.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
LUKACH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5310**

Amount of Each Disbursement this Period

74.65

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MARTIN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5311**

Amount of Each Disbursement this Period

38.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MARTIN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5312**

Amount of Each Disbursement this Period

51.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MARTIN 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5313**

Amount of Each Disbursement this Period

44.85

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
PETERSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5314**

Amount of Each Disbursement this Period

103.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5315**

Amount of Each Disbursement this Period

9.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5316**

Amount of Each Disbursement this Period

4.26

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5317**

Amount of Each Disbursement this Period

13.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5318**

Amount of Each Disbursement this Period

14.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5319**

Amount of Each Disbursement this Period

2.24

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5320**

Amount of Each Disbursement this Period

58.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5321**

Amount of Each Disbursement this Period

57.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5322**

Amount of Each Disbursement this Period

64.68

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5323

Amount of Each Disbursement this Period

30.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5324

Amount of Each Disbursement this Period

9.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5325

Amount of Each Disbursement this Period

48.61

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5326**

Amount of Each Disbursement this Period

12.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5327**

Amount of Each Disbursement this Period

30.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5328**

Amount of Each Disbursement this Period

4.22

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5329**

Amount of Each Disbursement this Period

58.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5330**

Amount of Each Disbursement this Period

4.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5331**

Amount of Each Disbursement this Period

28.94

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5332**

Amount of Each Disbursement this Period

13.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5333**

Amount of Each Disbursement this Period

30.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5334**

Amount of Each Disbursement this Period

8.65

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5335**

Amount of Each Disbursement this Period

3.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5336**

Amount of Each Disbursement this Period

11.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5337**

Amount of Each Disbursement this Period

48.51

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5338**

Amount of Each Disbursement this Period

13.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5339**

Amount of Each Disbursement this Period

32.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5340**

Amount of Each Disbursement this Period

19.21

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5341**

Amount of Each Disbursement this Period

95.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5342**

Amount of Each Disbursement this Period

4.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5343**

Amount of Each Disbursement this Period

43.89

☒ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

0.00

**Total This Period (last page this line number only)**.....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5344

Amount of Each Disbursement this Period

26.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5345

Amount of Each Disbursement this Period

77.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5346

Amount of Each Disbursement this Period

59.73

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5347**

Amount of Each Disbursement this Period

48.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5348**

Amount of Each Disbursement this Period

31.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
WOOD 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5352**

Amount of Each Disbursement this Period

163.85

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MINNEAPOLIS CLUB**

Mailing Address 729 2ND AVE S

City State Zip Code  
MINNEAPOLIS MN 55402

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: FACILITY RENTAL/CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5358

Amount of Each Disbursement this Period

2613.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SB23.5363

Amount of Each Disbursement this Period

33.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

Transaction ID : SB23.5364

Amount of Each Disbursement this Period

35.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.5361

Amount of Each Disbursement this Period

3.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

Purpose of Disbursement  
GALLATIN 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 05 / 2015

Transaction ID : SB23.5360

Amount of Each Disbursement this Period

39.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5362

Amount of Each Disbursement this Period

38.68

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALYSSA A MOYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6659

Amount of Each Disbursement this Period

4321.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALYSSA A MOYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6660

Amount of Each Disbursement this Period

4762.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALYSSA A MOYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6661

Amount of Each Disbursement this Period

4732.44

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALYSSA A MOYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6662

Amount of Each Disbursement this Period

4631.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALYSSA A MOYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6663

Amount of Each Disbursement this Period

4460.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALYSSA A MOYER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6664

Amount of Each Disbursement this Period

2060.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MOZ**

Mailing Address 1100 2ND AVE

City State Zip Code  
SEATTLE WA 98101

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5366

Amount of Each Disbursement this Period

249.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6666

Amount of Each Disbursement this Period

1400.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6667

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6668

Amount of Each Disbursement this Period

1544.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6669

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6670

Amount of Each Disbursement this Period

1544.64

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6671

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. COURTNEY MULLEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6672

Amount of Each Disbursement this Period

732.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NATHAN NAIDU**

Mailing Address 3601 CANTON ROAD #131

City State Zip Code  
MARIETTA GA 30066

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6983

Amount of Each Disbursement this Period

231.21

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

231.21

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NATIONAL CAPITAL TELESERVICE LLC**

Mailing Address 300 FIFTH STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.5368**

Amount of Each Disbursement this Period

5350.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NATIONAL CAPITAL TELESERVICE LLC**

Mailing Address 300 FIFTH STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

**Transaction ID : SB23.5369**

Amount of Each Disbursement this Period

5493.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NATIONAL CAPITAL TELESERVICE LLC**

Mailing Address 300 FIFTH STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SB23.5370**

Amount of Each Disbursement this Period

15867.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

26710.80

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NATIONAL CAPITAL TELESERVICE LLC**

Mailing Address 300 FIFTH STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5371

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NATIONAL CAPITAL TELESERVICE LLC**

Mailing Address 300 FIFTH STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
TELEMARKETING AND DATA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5372

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City  
MADISON

State  
WI

Zip Code  
53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

Transaction ID : SB23.6681

Amount of Each Disbursement this Period

72.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

10000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6682

Amount of Each Disbursement this Period

254.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.6683

Amount of Each Disbursement this Period

12.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6684

Amount of Each Disbursement this Period

115.83

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.6685

Amount of Each Disbursement this Period

72.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.6686

Amount of Each Disbursement this Period

82.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.6687

Amount of Each Disbursement this Period

31.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SB23.6688**

Amount of Each Disbursement this Period

33.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6984**

Amount of Each Disbursement this Period

1407.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6985**

Amount of Each Disbursement this Period

889.44

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2296.92

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILL NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 25 / 2015

Transaction ID : SB23.6986

Amount of Each Disbursement this Period

361.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6674

Amount of Each Disbursement this Period

1693.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6675

Amount of Each Disbursement this Period

2316.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

361.85

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6676

Amount of Each Disbursement this Period

2306.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6677

Amount of Each Disbursement this Period

2316.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6987

Amount of Each Disbursement this Period

301.30

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

301.30

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6678**

Amount of Each Disbursement this Period

2295.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

**Transaction ID : SB23.6988**

Amount of Each Disbursement this Period

3316.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.6989**

Amount of Each Disbursement this Period

559.24

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3875.57

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM E NEITZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6679

Amount of Each Disbursement this Period

1060.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ROBERT H NELSON**

Mailing Address 1829 BAY STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6991

Amount of Each Disbursement this Period

5250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NETBRANDS MEDIA CORP.**

Mailing Address 14550 BEECHNUT ST

City HOUSTON State TX Zip Code 77083

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5374

Amount of Each Disbursement this Period

249.58

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5250.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NEW RIVER RESEARCH INSTITUTE LLC**

Mailing Address 2150 COUNTRY CLUB ROAD #221

City Winston-Salem State NC Zip Code 27104

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5376**

Amount of Each Disbursement this Period

14800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NEW RIVER RESEARCH INSTITUTE LLC**

Mailing Address 2150 COUNTRY CLUB ROAD #221

City Winston-Salem State NC Zip Code 27104

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5377**

Amount of Each Disbursement this Period

14800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANIEL O'DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City Madison State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6705**

Amount of Each Disbursement this Period

6845.41

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

29600.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. DANIEL O'DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6706

Amount of Each Disbursement this Period

6870.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DANIEL O'DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.6994

Amount of Each Disbursement this Period

4185.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DANIEL O'DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6995

Amount of Each Disbursement this Period

583.27

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

4769.22

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANNY O'DRISCOLL**

Mailing Address PER DIEMS

City  
**GREENFIELD**

State  
**IA**

Zip Code  
**50849**

Purpose of Disbursement  
**O'DRISCOLL 09/09 REIMBURSEMENT: EVENT CONSULTING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SB23.5491**

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OCEAN PRIME DENVER**

Mailing Address 1465 LARIMER ST

City  
**DENVER**

State  
**CO**

Zip Code  
**80202**

Purpose of Disbursement  
**HIGGINS 08/07 REIMBURSEMENT: MEETING EXPENSE: MEALS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 27 / 2015

**Transaction ID : SB23.5379**

Amount of Each Disbursement this Period

336.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATT OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**OCZKOWSKI 08/07 REIMBURSEMENT: MILEAGE**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6703**

Amount of Each Disbursement this Period

58.80

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATT OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.6992

Amount of Each Disbursement this Period

1589.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATT OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6993

Amount of Each Disbursement this Period

500.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6695

Amount of Each Disbursement this Period

5868.03

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

2090.19

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6696

Amount of Each Disbursement this Period

6649.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6697

Amount of Each Disbursement this Period

6883.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6698

Amount of Each Disbursement this Period

6649.19

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6699**

Amount of Each Disbursement this Period

6673.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6700**

Amount of Each Disbursement this Period

6649.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW EDWARD OCZKOWSKI**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6701**

Amount of Each Disbursement this Period

3136.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANIEL MICHAEL O DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6690

Amount of Each Disbursement this Period

6652.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DANIEL MICHAEL O DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6691

Amount of Each Disbursement this Period

7101.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANIEL MICHAEL O DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6692

Amount of Each Disbursement this Period

6845.41

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANIEL MICHAEL O DRISCOLL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6693**

Amount of Each Disbursement this Period

3162.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City State Zip Code  
BOCA RATON FL 33496

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

**Transaction ID : SB23.5383**

Amount of Each Disbursement this Period

47.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City State Zip Code  
BOCA RATON FL 33496

Purpose of Disbursement  
CENSKY 08/07 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

**Transaction ID : SB23.5381**

Amount of Each Disbursement this Period

41.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.5384

Amount of Each Disbursement this Period

13.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement  
CENSKY 08/07 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5382

Amount of Each Disbursement this Period

17.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.5385

Amount of Each Disbursement this Period

9.83

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement  
YOUNG 09/24 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 02 / 2015

Transaction ID : SB23.5386

Amount of Each Disbursement this Period

42.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OKTA**

Mailing Address 301 BRANNAN STREET #300

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.5388

Amount of Each Disbursement this Period

1920.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OLD DOMINION RESEARCH GROUP LLC**

Mailing Address PO BOX 151444

City ALEXANDRIA State VA Zip Code 22315

Purpose of Disbursement  
RESEARCH FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5391

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

41920.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OLD DOMINION RESEARCH GROUP LLC**

Mailing Address PO BOX 151444

City  
ALEXANDRIA

State  
VA

Zip Code  
22315

Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5390

Amount of Each Disbursement this Period

8243.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ON POINT DIGITAL LLC**

Mailing Address 11418 VALLEY STREAM DRIVE

City  
HOUSTON

State  
TX

Zip Code  
77043

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5393

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OPTIMIZEZLY INC.**

Mailing Address 631 HOWARD STREET #100

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5395

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

15743.75

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ORBITZ**

Mailing Address 500 W MADISON ST

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement  
GRIFFITH 9/24 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

**Transaction ID : SB23.5400**

Amount of Each Disbursement this Period

846.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ORBITZ**

Mailing Address 500 W MADISON ST

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.5397**

Amount of Each Disbursement this Period

6.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ORBITZ**

Mailing Address 500 W MADISON ST

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.5398**

Amount of Each Disbursement this Period

6.99

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ORBITZ**

Mailing Address 500 W MADISON ST

City  
**CHICAGO**

State  
**IL**

Zip Code  
**60661**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: TRANSACTION FEE**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.5399**

Amount of Each Disbursement this Period

6.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ELISE OTTEN**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6708**

Amount of Each Disbursement this Period

1400.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ELISE OTTEN**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6709**

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ELISE OTTEN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6710

Amount of Each Disbursement this Period

1544.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ELISE OTTEN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6711

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ELISE OTTEN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6712

Amount of Each Disbursement this Period

1544.64

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ELISE OTTEN**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6713

Amount of Each Disbursement this Period

1534.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OUR AMERICAN REVIVAL**

Mailing Address PO BOX 628154

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5402

Amount of Each Disbursement this Period

2240.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OUR AMERICAN REVIVAL**

Mailing Address PO BOX 628154

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5404

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2740.41

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OUR AMERICAN REVIVAL**

Mailing Address **PO BOX 628154**

City **MIDDLETON** State **WI** Zip Code **53562**

Purpose of Disbursement  
**OFFICE EQUIPMENT PURCHASE**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.5403**

Amount of Each Disbursement this Period

12695.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address **71 FIFTH AVE**

City **NEW YORK** State **NY** Zip Code **10003**

Purpose of Disbursement  
**AMEX 07/22 PMT: TRAVEL: TRANSACTION FEE**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

**Transaction ID : SB23.5406**

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address **71 FIFTH AVE**

City **NEW YORK** State **NY** Zip Code **10003**

Purpose of Disbursement  
**AMEX 07/22 PMT: TRAVEL: TRANSACTION FEE**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

**Transaction ID : SB23.5407**

Amount of Each Disbursement this Period

635.20

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

12695.68

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5408

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5409

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5410

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5411

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5412

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5413

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5414

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5415

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5416

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5417

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5418

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5419

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5420

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5421

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5422

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5423

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5424

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5425

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5426

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5427

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5428

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5429

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5430

Amount of Each Disbursement this Period

269.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5431

Amount of Each Disbursement this Period

373.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5432

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5433

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5434

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5435

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5436

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5437

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5438

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5439

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5440

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5441

Amount of Each Disbursement this Period

554.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5442

Amount of Each Disbursement this Period

604.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5443

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2439 / 2740

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

**Transaction ID : SB23.5444**

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

**Transaction ID : SB23.5445**

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

**Transaction ID : SB23.5446**

Amount of Each Disbursement this Period

635.20

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2440 / 2740

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5447

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5448

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5449

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2441 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5450

Amount of Each Disbursement this Period

683.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5451

Amount of Each Disbursement this Period

683.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5452

Amount of Each Disbursement this Period

13.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2442 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5453

Amount of Each Disbursement this Period

303.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5454

Amount of Each Disbursement this Period

164.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5455

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2443 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5456

Amount of Each Disbursement this Period

635.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.5457

Amount of Each Disbursement this Period

13.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: TRANSACTION FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.5458

Amount of Each Disbursement this Period

535.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2444 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State Zip Code  
NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5459

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State Zip Code  
NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5460

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State Zip Code  
NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5461

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2445 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5462

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5463

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5464

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2446 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5465

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5466

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5467

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2447 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State Zip Code  
NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5468

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State Zip Code  
NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5469

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City  
NEW YORK

State Zip Code  
NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5470

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2448 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5471

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5472

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5473

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2449 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5474

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5475

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5476

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2450 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5477

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. OVATION**

Mailing Address 71 FIFTH AVE

City State Zip Code  
NEW YORK NY 10003

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: TRANSACTION FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5478

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City State Zip Code  
SAINT LOUIS MO 63127

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB23.5481

Amount of Each Disbursement this Period

24.44

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

Transaction ID : SB23.5487

Amount of Each Disbursement this Period

10.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.5482

Amount of Each Disbursement this Period

9.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
KAYE 9/9 REIMBURSEMENT: MEETING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.5489

Amount of Each Disbursement this Period

262.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5483

Amount of Each Disbursement this Period

8.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5488

Amount of Each Disbursement this Period

116.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
GLAUSER 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5484

Amount of Each Disbursement this Period

26.97

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
GLAUSER 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5485

Amount of Each Disbursement this Period

35.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
GLAUSER 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5486

Amount of Each Disbursement this Period

35.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PANERA BREAD**

Mailing Address 3630 S. GEYER ROAD SUITE 100

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5480

Amount of Each Disbursement this Period

32.27

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PERCOLATE**

Mailing Address 107 GRAND STREET, 2ND FLOOR

City State Zip Code  
NEW YORK NY 10013

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 02 / 2015

Transaction ID : SB23.5495

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSEPHINE H PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6715

Amount of Each Disbursement this Period

3202.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOSEPHINE H PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6716

Amount of Each Disbursement this Period

3534.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

6000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOSEPHINE H PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6717

Amount of Each Disbursement this Period

4171.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSEPHINE H PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6718

Amount of Each Disbursement this Period

3749.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOSEPHINE H PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6719

Amount of Each Disbursement this Period

3725.71

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOSEPHINE H PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6720

Amount of Each Disbursement this Period

1721.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOSIE PETERSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.6997

Amount of Each Disbursement this Period

223.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PETROLEUM CLUB OF DALLAS**

Mailing Address 2200 ROSS AVENUE

City State Zip Code  
DALLAS TX 75201

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 02 / 2015

Transaction ID : SB23.5497

Amount of Each Disbursement this Period

290.86

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

223.83

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PFISTER HOTEL**

Mailing Address 424 E WISCONSIN AVE

City State Zip Code  
MILWAUKEE WI 53202

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5499

Amount of Each Disbursement this Period

283.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PFISTER HOTEL**

Mailing Address 424 E WISCONSIN AVE

City State Zip Code  
MILWAUKEE WI 53202

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5500

Amount of Each Disbursement this Period

247.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PFISTER HOTEL**

Mailing Address 424 E WISCONSIN AVE

City State Zip Code  
MILWAUKEE WI 53202

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5501

Amount of Each Disbursement this Period

410.47

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HUDSON C PHILLIPS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6722

Amount of Each Disbursement this Period

2533.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HUDSON C PHILLIPS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6723

Amount of Each Disbursement this Period

2796.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HUDSON C PHILLIPS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6724

Amount of Each Disbursement this Period

2786.92

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HUDSON C PHILLIPS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6725

Amount of Each Disbursement this Period

2784.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HUDSON C PHILLIPS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6726

Amount of Each Disbursement this Period

2773.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HUDSON C PHILLIPS**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6727

Amount of Each Disbursement this Period

1281.37

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FRED PREHN**

Mailing Address 413 JEFFERSON STREET

City  
WAUSAU

State  
WI

Zip Code  
54403

Purpose of Disbursement  
IN-KIND: CATERING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.7053

Amount of Each Disbursement this Period

1286.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. LINDA PREHN**

Mailing Address 413 JEFFERSON STREET

City  
WAUSAU

State  
WI

Zip Code  
54403

Purpose of Disbursement  
IN-KIND: CATERING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.7051

Amount of Each Disbursement this Period

1286.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PRINTERS SQUARE**

Mailing Address 105 FALTIN DRIVE

City  
MANCHESTER

State  
NH

Zip Code  
03103

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: PRINTING AND DESIGN  
SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.5503

Amount of Each Disbursement this Period

717.69

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

2572.50

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PRINTERS SQUARE**

Mailing Address 105 FALTIN DRIVE

City State Zip Code  
MANCHESTER NH 03103

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: PRINTING AND DESIGN  
SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.5504

Amount of Each Disbursement this Period

1099.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PRO ONE JANITORIAL INC.**

Mailing Address 1101 ASHWAUBENON STREET

City State Zip Code  
GREEN BAY WI 54304

Purpose of Disbursement  
CLEANING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5506

Amount of Each Disbursement this Period

1656.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PRO ONE JANITORIAL INC.**

Mailing Address 1101 ASHWAUBENON STREET

City State Zip Code  
GREEN BAY WI 54304

Purpose of Disbursement  
CLEANING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5507

Amount of Each Disbursement this Period

1656.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

3312.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PRO ONE JANITORIAL INC.**

Mailing Address 1101 ASHWAUBENON STREET

City GREEN BAY State WI Zip Code 54304

Purpose of Disbursement  
CLEANING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.5508**

Amount of Each Disbursement this Period

1953.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PROPERTY IMAGE LLC**

Mailing Address 967 JONATHON DRIVE

City MADISON State WI Zip Code 53713

Purpose of Disbursement  
OFFICE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.5511**

Amount of Each Disbursement this Period

830.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PROSPECT STRATEGIC COMMUNICATIONS LLC**

Mailing Address PO BOX 17079

City ARLINGTON State VA Zip Code 22216

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.5513**

Amount of Each Disbursement this Period

14003.35

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

16786.82

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. PROTECTION TECHNOLOGIES**

Mailing Address PO BOX 380

City MCFARLAND State WI Zip Code 53558

Purpose of Disbursement  
OFFICE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5515

Amount of Each Disbursement this Period

269.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6729

Amount of Each Disbursement this Period

4065.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6730

Amount of Each Disbursement this Period

4463.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

269.03

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.7000**

Amount of Each Disbursement this Period

671.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6731**

Amount of Each Disbursement this Period

4488.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.7001**

Amount of Each Disbursement this Period

1089.21

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1760.41

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6732

Amount of Each Disbursement this Period

4463.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.7002

Amount of Each Disbursement this Period

522.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6733

Amount of Each Disbursement this Period

4488.84

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

522.70

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.7003

Amount of Each Disbursement this Period

1755.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6734

Amount of Each Disbursement this Period

4463.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEANETTE PURCELL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6735

Amount of Each Disbursement this Period

2085.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

1755.96

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. QUAD CITIES RIVER BANDITS**

Mailing Address 209 S GAINES STREET

City State Zip Code

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

**Transaction ID : SB23.5517**

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6737**

Amount of Each Disbursement this Period

2625.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6738**

Amount of Each Disbursement this Period

3115.02

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

700.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6739

Amount of Each Disbursement this Period

3355.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6740

Amount of Each Disbursement this Period

3115.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6741

Amount of Each Disbursement this Period

3140.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6742

Amount of Each Disbursement this Period

3115.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DISHANT RANA**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6743

Amount of Each Disbursement this Period

1462.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. REAGAN NATIONAL AIRPORT**

Mailing Address 2401 S. SMITH BLVD.

City State Zip Code  
ARLINGTON VA 22202

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5519

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. REAGAN NATIONAL AIRPORT**

Mailing Address 2401 S. SMITH BLVD.

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5520

Amount of Each Disbursement this Period

68.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. REAGAN NATIONAL AIRPORT**

Mailing Address 2401 S. SMITH BLVD.

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
O'DRISCOLL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

Transaction ID : SB23.5521

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. REAGAN NATIONAL AIRPORT**

Mailing Address 2401 S. SMITH BLVD.

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
O'DRISCOLL 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 20 / 2015

Transaction ID : SB23.5522

Amount of Each Disbursement this Period

100.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RED CURVE SOLUTIONS LLC**

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
FUNDRAISING SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.5524**

Amount of Each Disbursement this Period

18000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RED CURVE SOLUTIONS LLC**

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
FUNDRAISING SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5525**

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RED OAK STRATEGIC LLC**

Mailing Address PO BOX 2561

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.5527**

Amount of Each Disbursement this Period

16100.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

46100.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RED OAK STRATEGIC LLC**

Mailing Address PO BOX 2561

City  
**ALEXANDRIA**

State  
**VA**

Zip Code  
**22301**

Purpose of Disbursement  
**SOFTWARE**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5528**

Amount of Each Disbursement this Period

899.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City  
**BETHESDA**

State  
**MD**

Zip Code  
**20817**

Purpose of Disbursement  
**WILEY 07/22 REIMBURSEMENT: TRAVEL: LODGING**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 20 / 2015

**Transaction ID : SB23.5541**

Amount of Each Disbursement this Period

248.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City  
**BETHESDA**

State  
**MD**

Zip Code  
**20817**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SB23.5531**

Amount of Each Disbursement this Period

201.04

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

899.48

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5532

Amount of Each Disbursement this Period

201.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5533

Amount of Each Disbursement this Period

201.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5534

Amount of Each Disbursement this Period

201.04

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5535

Amount of Each Disbursement this Period

201.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5536

Amount of Each Disbursement this Period

224.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5537

Amount of Each Disbursement this Period

224.24

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5538

Amount of Each Disbursement this Period

224.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
ADAMS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5530

Amount of Each Disbursement this Period

33.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 13 / 2015

Transaction ID : SB23.5540

Amount of Each Disbursement this Period

23.38

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RENAISSANCE HOTELS**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

Transaction ID : SB23.5539

Amount of Each Disbursement this Period

40.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5543

Amount of Each Disbursement this Period

1.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5544

Amount of Each Disbursement this Period

608.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5545

Amount of Each Disbursement this Period

640.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5546

Amount of Each Disbursement this Period

335.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

Transaction ID : SB23.5547

Amount of Each Disbursement this Period

353.16

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5548

Amount of Each Disbursement this Period

1825.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RESIDENCE INN**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 02 / 2015

Transaction ID : SB23.5549

Amount of Each Disbursement this Period

614.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOHN RHODEN**

Mailing Address 1201 EAST 230 SOUTH

City State Zip Code  
PROVO UT 84606

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.7005

Amount of Each Disbursement this Period

222.23

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

222.23

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JOHN RHODEN**

Mailing Address 1201 EAST 230 SOUTH

City State Zip Code  
PROVO UT 84606

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.7006**

Amount of Each Disbursement this Period

841.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JOHN RHODEN**

Mailing Address 1201 EAST 230 SOUTH

City State Zip Code  
PROVO UT 84606

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.7007**

Amount of Each Disbursement this Period

685.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JOHN RHODEN**

Mailing Address 1201 EAST 230 SOUTH

City State Zip Code  
PROVO UT 84606

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.7008**

Amount of Each Disbursement this Period

195.45

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1723.05

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RMD CORBEN LLC**

Mailing Address 6220 NESBITT ROAD

City  
MADISON

State  
WI

Zip Code  
53719

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB23.5553

Amount of Each Disbursement this Period

63519.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RMD CORBEN LLC**

Mailing Address 6220 NESBITT ROAD

City  
MADISON

State  
WI

Zip Code  
53719

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.5554

Amount of Each Disbursement this Period

34531.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RMD CORBEN LLC**

Mailing Address 6220 NESBITT ROAD

City  
MADISON

State  
WI

Zip Code  
53719

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5556

Amount of Each Disbursement this Period

696.67

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

98747.71

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RMD CORBEN LLC**

Mailing Address 6220 NESBITT ROAD

City MADISON State WI Zip Code 53719

Purpose of Disbursement  
RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.5555

Amount of Each Disbursement this Period

34531.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ROARING GAP CLUB INC.**

Mailing Address PO BOX 129

City ROARING GAP State NC Zip Code 28668

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5558

Amount of Each Disbursement this Period

2841.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ROCKY ROCOCO**

Mailing Address 1753 THIERER RD

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5560

Amount of Each Disbursement this Period

310.80

☒ Memo Item

Subtotal Of Receipts This Page (optional)..... 37372.36

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SALESFORCE.COM INC.**

Mailing Address PO BOX 203141

City  
DALLAS

State  
TX

Zip Code  
75320

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5562**

Amount of Each Disbursement this Period

4560.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SALLY'S RESTAURANT**

Mailing Address 1 MARKET PLACE

City  
SAN DIEGO

State  
CA

Zip Code  
92101

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SB23.5564**

Amount of Each Disbursement this Period

262.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SANTOSUOSSO, LYNN**

Mailing Address 89 CHURCH STREET

City  
BARRINGTON

State  
NH

Zip Code  
03825

Purpose of Disbursement  
EVENT CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 23 / 2015

**Transaction ID : SB23.5566**

Amount of Each Disbursement this Period

4550.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

9110.00

**Total This Period** (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. KATELYN SCHMIDT

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6745

Amount of Each Disbursement this Period

1605.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. KATELYN SCHMIDT

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6746

Amount of Each Disbursement this Period

1759.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. KATELYN SCHMIDT

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6747

Amount of Each Disbursement this Period

1769.44

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KATELYN SCHMIDT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6748**

Amount of Each Disbursement this Period

1759.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KATELYN SCHMIDT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.7009**

Amount of Each Disbursement this Period

313.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KATELYN SCHMIDT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6749**

Amount of Each Disbursement this Period

1769.44

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

313.11

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KATELYN SCHMIDT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6750**

Amount of Each Disbursement this Period

1759.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KATELYN SCHMIDT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6751**

Amount of Each Disbursement this Period

836.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCHNEIDER GRAPHICS INC.**

Mailing Address PO BOX 8246

City State Zip Code  
DES MOINES IA 50301

Purpose of Disbursement  
PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 28 / 2015

**Transaction ID : SB23.5568**

Amount of Each Disbursement this Period

585.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

585.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## A. MOLLY SCHWEICKERT

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6753

Amount of Each Disbursement this Period

3623.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## B. MOLLY SCHWEICKERT

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6754

Amount of Each Disbursement this Period

3997.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## C. MOLLY SCHWEICKERT

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6755

Amount of Each Disbursement this Period

4665.59

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MOLLY SCHWEICKERT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6756

Amount of Each Disbursement this Period

4224.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MOLLY SCHWEICKERT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6757

Amount of Each Disbursement this Period

4038.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MOLLY SCHWEICKERT**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6758

Amount of Each Disbursement this Period

1836.27

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCM ASSOCIATES INC.**

Mailing Address PO BOX 254

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2016

☒

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5570

Amount of Each Disbursement this Period

161028.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SCM ASSOCIATES INC.**

Mailing Address PO BOX 254

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2016

☒

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5571

Amount of Each Disbursement this Period

89226.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SCM ASSOCIATES INC.**

Mailing Address PO BOX 254

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2016

☒

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5572

Amount of Each Disbursement this Period

49361.74

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

299616.40

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SCM ASSOCIATES INC.**

Mailing Address PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.5573**

Amount of Each Disbursement this Period

22364.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SEEN READ HEARD LLC**

Mailing Address 8000 MARYLAND AVENUE #1120

City CLAYTON State MO Zip Code 63105

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.5575**

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SEOMOZ**

Mailing Address 1100 2ND AVE SUITE 500

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

**Transaction ID : SB23.5577**

Amount of Each Disbursement this Period

249.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

28364.90

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NICHOLAS R SHARKEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6760**

Amount of Each Disbursement this Period

4353.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NICHOLAS R SHARKEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6761**

Amount of Each Disbursement this Period

6309.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NICHOLAS R SHARKEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6762**

Amount of Each Disbursement this Period

6110.62

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. NICHOLAS R SHARKEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6763**

Amount of Each Disbursement this Period

5817.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. NICHOLAS R SHARKEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6764**

Amount of Each Disbursement this Period

5771.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. NICHOLAS R SHARKEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6765**

Amount of Each Disbursement this Period

2666.22

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SHARP POLITICS LLC**

Mailing Address PO BOX 25122

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
VIDEO PRODUCTION SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5579

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SHARP POLITICS LLC**

Mailing Address PO BOX 25122

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
VIDEO PRODUCTION SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.5580

Amount of Each Disbursement this Period

29394.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SHARP POLITICS LLC**

Mailing Address PO BOX 25122

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
VIDEO PRODUCTION SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5581

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

45094.30

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW B SHAW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6767**

Amount of Each Disbursement this Period

3030.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANDREW B SHAW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6768**

Amount of Each Disbursement this Period

6633.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW B SHAW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6769**

Amount of Each Disbursement this Period

6581.59

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANDREW B SHAW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6770**

Amount of Each Disbursement this Period

2915.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SHERATON CITY CENTER**

Mailing Address 201 N 17TH ST

City State Zip Code  
PHILADELPHIA PA 19103

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 05 / 2015

**Transaction ID : SB23.5583**

Amount of Each Disbursement this Period

183.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SHERATON CITY CENTER**

Mailing Address 201 N 17TH ST

City State Zip Code  
PHILADELPHIA PA 19103

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 05 / 2015

**Transaction ID : SB23.5584**

Amount of Each Disbursement this Period

367.29

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SHERATON CITY CENTER**

Mailing Address 201 N 17TH ST

City State Zip Code  
PHILADELPHIA PA 19103

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 19 / 2015

Transaction ID : SB23.5586

Amount of Each Disbursement this Period

8.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SHERATON CITY CENTER**

Mailing Address 201 N 17TH ST

City State Zip Code  
PHILADELPHIA PA 19103

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 20 / 2015

Transaction ID : SB23.5587

Amount of Each Disbursement this Period

95.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SHERATON CITY CENTER**

Mailing Address 201 N 17TH ST

City State Zip Code  
PHILADELPHIA PA 19103

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 21 / 2015

Transaction ID : SB23.5585

Amount of Each Disbursement this Period

72.91

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ERIC W SHERRED**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6772

Amount of Each Disbursement this Period

3623.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ERIC W SHERRED**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6773

Amount of Each Disbursement this Period

4446.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ERIC W SHERRED**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6774

Amount of Each Disbursement this Period

4196.09

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ERIC W SHERRED**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6775

Amount of Each Disbursement this Period

4216.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ERIC W SHERRED**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6776

Amount of Each Disbursement this Period

4032.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ERIC W SHERRED**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6777

Amount of Each Disbursement this Period

1833.05

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SHIRLEY & BANISTER PUBLIC AFFAIRS**

Mailing Address 122 S PATRICK STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.5589

Amount of Each Disbursement this Period

9200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SHOREBY CLUB**

Mailing Address 40 SHOREBY DRIVE

City BRATENAHL State OH Zip Code 44108

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5591

Amount of Each Disbursement this Period

1818.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SHRED-IT USA LLC**

Mailing Address 21 MARSH COURT

City MADISON State WI Zip Code 53718

Purpose of Disbursement  
OFFICE MAINTENANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

Transaction ID : SB23.5594

Amount of Each Disbursement this Period

198.22

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

11216.85

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SINATRA**

Mailing Address 3131 S LAS VEGAS BLVD

City  
LAS VEGAS

State  
NV

Zip Code  
89109

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.5596

Amount of Each Disbursement this Period

295.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SKYBRIDGE CAPITAL**

Mailing Address 527 MADISON AVENUE, 16TH FL

City  
NEW YORK

State  
NY

Zip Code  
10022

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5598

Amount of Each Disbursement this Period

375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SLACK TECHNOLOGIES, INC**

Mailing Address 155 5TH STREET, 6TH FLOOR

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.5600

Amount of Each Disbursement this Period

271.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

375.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SLACK TECHNOLOGIES, INC.**

Mailing Address 155 5TH STREET, 6TH FLOOR

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SB23.5602**

Amount of Each Disbursement this Period

272.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6779**

Amount of Each Disbursement this Period

6001.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6780**

Amount of Each Disbursement this Period

7272.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6781

Amount of Each Disbursement this Period

7960.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6782

Amount of Each Disbursement this Period

7491.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6783

Amount of Each Disbursement this Period

7515.70

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6784**

Amount of Each Disbursement this Period

7491.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. HEATHER K SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6785**

Amount of Each Disbursement this Period

3563.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.7010**

Amount of Each Disbursement this Period

655.37

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

655.37

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.7011

Amount of Each Disbursement this Period

398.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
SMITH 9/9 REIMBURSEMENT: PER DIEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

Transaction ID : SB23.6891

Amount of Each Disbursement this Period

600.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
SMITH 09/24 REIMBURSEMENT: EVENT CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.5493

Amount of Each Disbursement this Period

1350.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

398.82

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.7012**

Amount of Each Disbursement this Period

662.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.7013**

Amount of Each Disbursement this Period

358.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JESSE SMITH**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.7014**

Amount of Each Disbursement this Period

1776.15

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

2796.41

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEFFREY R SNOW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6787

Amount of Each Disbursement this Period

1693.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEFFREY R SNOW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6788

Amount of Each Disbursement this Period

2316.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEFFREY R SNOW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6789

Amount of Each Disbursement this Period

2306.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JEFFREY R SNOW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6790**

Amount of Each Disbursement this Period

2316.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JEFFREY R SNOW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6791**

Amount of Each Disbursement this Period

2295.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JEFFREY R SNOW**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6792**

Amount of Each Disbursement this Period

1060.71

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SNOW PHOTOGRAPHY**

Mailing Address PO BOX 34763

City  
WASHINGTON

State  
DC

Zip Code  
20043

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.5604**

Amount of Each Disbursement this Period

13016.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SNOW PHOTOGRAPHY**

Mailing Address PO BOX 34763

City  
WASHINGTON

State  
DC

Zip Code  
20043

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.5605**

Amount of Each Disbursement this Period

10371.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUND CENTRAL LLC**

Mailing Address 1230 POPLAR AVENUE

City  
SUPERIOR

State  
WI

Zip Code  
54880

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5607**

Amount of Each Disbursement this Period

5337.00

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

28724.84

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTH CAROLINA REPUBLICAN PARTY**

Mailing Address 1913 MARION STREET

City COLUMBIA State SC Zip Code 29201

Purpose of Disbursement  
BALLOT ACCESS FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.5609

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 15 / 2015

Transaction ID : SB23.5611

Amount of Each Disbursement this Period

584.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 15 / 2015

Transaction ID : SB23.5612

Amount of Each Disbursement this Period

584.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

40000.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5613

Amount of Each Disbursement this Period

478.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 29 / 2015

Transaction ID : SB23.5614

Amount of Each Disbursement this Period

356.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

Transaction ID : SB23.5615

Amount of Each Disbursement this Period

678.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.5616

Amount of Each Disbursement this Period

524.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.5617

Amount of Each Disbursement this Period

3732.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5618

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5619

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5620

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5621

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5622

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

Transaction ID : SB23.5623

Amount of Each Disbursement this Period

339.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

Transaction ID : SB23.5657

Amount of Each Disbursement this Period

242.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.5658

Amount of Each Disbursement this Period

249.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5624

Amount of Each Disbursement this Period

26.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5625

Amount of Each Disbursement this Period

26.99

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5626

Amount of Each Disbursement this Period

26.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5627

Amount of Each Disbursement this Period

26.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5628

Amount of Each Disbursement this Period

26.99

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 11 / 2015

Transaction ID : SB23.5653

Amount of Each Disbursement this Period

218.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.5629

Amount of Each Disbursement this Period

2988.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5630

Amount of Each Disbursement this Period

452.01

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City State Zip Code  
DALLAS TX 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5631

Amount of Each Disbursement this Period

261.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City State Zip Code  
DALLAS TX 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5632

Amount of Each Disbursement this Period

-267.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City State Zip Code  
DALLAS TX 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5633

Amount of Each Disbursement this Period

-267.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5634

Amount of Each Disbursement this Period

-267.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5635

Amount of Each Disbursement this Period

-267.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5636

Amount of Each Disbursement this Period

-267.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5637

Amount of Each Disbursement this Period

-267.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5638

Amount of Each Disbursement this Period

-231.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5639

Amount of Each Disbursement this Period

104.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5640

Amount of Each Disbursement this Period

480.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5641

Amount of Each Disbursement this Period

556.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5642

Amount of Each Disbursement this Period

252.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5659

Amount of Each Disbursement this Period

193.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5660

Amount of Each Disbursement this Period

314.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5661

Amount of Each Disbursement this Period

188.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5662

Amount of Each Disbursement this Period

186.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5663

Amount of Each Disbursement this Period

79.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
KAYE 9/9 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5665

Amount of Each Disbursement this Period

460.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5643

Amount of Each Disbursement this Period

278.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5644

Amount of Each Disbursement this Period

834.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5645

Amount of Each Disbursement this Period

278.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5646

Amount of Each Disbursement this Period

972.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5647

Amount of Each Disbursement this Period

1308.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5648

Amount of Each Disbursement this Period

394.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5649

Amount of Each Disbursement this Period

149.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
KAYE 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.5652

Amount of Each Disbursement this Period

439.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.5651

Amount of Each Disbursement this Period

157.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB23.5654**

Amount of Each Disbursement this Period

68.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SB23.5650**

Amount of Each Disbursement this Period

8.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WOOD 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SB23.5664**

Amount of Each Disbursement this Period

8.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 22 / 2015

Transaction ID : SB23.5655

Amount of Each Disbursement this Period

132.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 25 / 2015

Transaction ID : SB23.5656

Amount of Each Disbursement this Period

99.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST FLORIDA INTERNATIONAL**

Mailing Address 11000 TERMINAL ACCESS RD

City FORT MYERS State FL Zip Code 33913

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 29 / 2015

Transaction ID : SB23.5667

Amount of Each Disbursement this Period

76.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST FLORIDA INTERNATIONAL**

Mailing Address 11000 TERMINAL ACCESS RD

City State Zip Code  
FORT MYERS FL 33913

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.5668

Amount of Each Disbursement this Period

43.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST FLORIDA INTERNATIONAL**

Mailing Address 11000 TERMINAL ACCESS RD

City State Zip Code  
FORT MYERS FL 33913

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2015

Transaction ID : SB23.5669

Amount of Each Disbursement this Period

72.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SOUTHWEST FLORIDA INTERNATIONAL**

Mailing Address 11000 TERMINAL ACCESS RD

City State Zip Code  
FORT MYERS FL 33913

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5670

Amount of Each Disbursement this Period

55.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SOUTHWEST PUBLISHING AND MAILING**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5672

Amount of Each Disbursement this Period

26594.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5674

Amount of Each Disbursement this Period

150.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5675

Amount of Each Disbursement this Period

150.08

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

26594.20

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.5676

Amount of Each Disbursement this Period

2701.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.5705

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5677

Amount of Each Disbursement this Period

604.80

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SB23.5678**

Amount of Each Disbursement this Period

604.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SB23.5679**

Amount of Each Disbursement this Period

604.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SB23.5680**

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5681

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5682

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5683

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5684

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5685

Amount of Each Disbursement this Period

302.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
O'DRISCOLL 09/09 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5706

Amount of Each Disbursement this Period

420.54

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5686

Amount of Each Disbursement this Period

231.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5687

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5688

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5689

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5690

Amount of Each Disbursement this Period

567.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5691

Amount of Each Disbursement this Period

420.54

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5692

Amount of Each Disbursement this Period

567.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5693

Amount of Each Disbursement this Period

420.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5694

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5695

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5696

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5697

Amount of Each Disbursement this Period

210.27

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5698

Amount of Each Disbursement this Period

420.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 22 / 2015

Transaction ID : SB23.5699

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

Transaction ID : SB23.5700

Amount of Each Disbursement this Period

302.34

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

Transaction ID : SB23.5701

Amount of Each Disbursement this Period

185.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

Transaction ID : SB23.5702

Amount of Each Disbursement this Period

185.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5703

Amount of Each Disbursement this Period

129.65

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SPRINGHILL SUITES**

Mailing Address 10400 FERNWOOD RD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5704

Amount of Each Disbursement this Period

151.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STACY DAVIS & ASSOCIATES**

Mailing Address 24651 EVEREVE CIRCLE #1

City State Zip Code  
LAKE FOREST CA 92630

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5713

Amount of Each Disbursement this Period

378.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STACY DAVIS & ASSOCIATES**

Mailing Address 24651 EVEREVE CIRCLE #1

City State Zip Code  
LAKE FOREST CA 92630

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.5714

Amount of Each Disbursement this Period

13200.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

13578.85

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

Transaction ID : SB23.5720

Amount of Each Disbursement this Period

35.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5721

Amount of Each Disbursement this Period

126.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5722

Amount of Each Disbursement this Period

159.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5723

Amount of Each Disbursement this Period

126.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5724

Amount of Each Disbursement this Period

159.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5716

Amount of Each Disbursement this Period

13.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.5725

Amount of Each Disbursement this Period

80.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5717

Amount of Each Disbursement this Period

28.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5718

Amount of Each Disbursement this Period

1.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5726

Amount of Each Disbursement this Period

126.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

Transaction ID : SB23.5727

Amount of Each Disbursement this Period

13.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
LUKACH 09/09 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5729

Amount of Each Disbursement this Period

21.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.5728

Amount of Each Disbursement this Period

126.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City State Zip Code  
FRAMINGHAM MA 01702

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 06 / 2015

Transaction ID : SB23.5719

Amount of Each Disbursement this Period

9.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
EVENSON 07/22 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SB23.5737

Amount of Each Disbursement this Period

12.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
MARTIN 08/07 REIMBURSEMENT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 08 / 2015

Transaction ID : SB23.5755

Amount of Each Disbursement this Period

10.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5745

Amount of Each Disbursement this Period

28.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.5738

Amount of Each Disbursement this Period

11.33

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5739

Amount of Each Disbursement this Period

18.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5746

Amount of Each Disbursement this Period

14.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5747

Amount of Each Disbursement this Period

10.70

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5748

Amount of Each Disbursement this Period

4.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
CORNELL 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5735

Amount of Each Disbursement this Period

7.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5749

Amount of Each Disbursement this Period

9.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.5740**

Amount of Each Disbursement this Period

6.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SB23.5741**

Amount of Each Disbursement this Period

6.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
DAY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.5736**

Amount of Each Disbursement this Period

5.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5750

Amount of Each Disbursement this Period

5.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.5731

Amount of Each Disbursement this Period

8.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.5732

Amount of Each Disbursement this Period

6.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.5742

Amount of Each Disbursement this Period

4.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.5751

Amount of Each Disbursement this Period

16.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 30 / 2015

Transaction ID : SB23.5752

Amount of Each Disbursement this Period

15.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.5753

Amount of Each Disbursement this Period

9.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

## B. STARBUCKS

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
MATEJOV 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.5756

Amount of Each Disbursement this Period

15.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

## C. STARBUCKS

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.5733

Amount of Each Disbursement this Period

10.97

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

Transaction ID : SB23.5734

Amount of Each Disbursement this Period

15.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

Transaction ID : SB23.5754

Amount of Each Disbursement this Period

4.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STARBUCKS**

Mailing Address 2401 UTAH AVE S

City State Zip Code  
SEATTLE WA 98134

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 22 / 2015

Transaction ID : SB23.5743

Amount of Each Disbursement this Period

8.40

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 22 / 2015

Transaction ID : SB23.5744

Amount of Each Disbursement this Period

11.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. STATE CENTER LOCKER

Mailing Address PO BOX 781

City STATE CENTER State IA Zip Code 50247

Purpose of Disbursement  
BURT 9/9 REIMBURSEMENT: EVENT CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5758

Amount of Each Disbursement this Period

223.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. MARK STEPHENSON

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6794

Amount of Each Disbursement this Period

7984.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARK STEPHENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6795

Amount of Each Disbursement this Period

8736.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARK STEPHENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.7021

Amount of Each Disbursement this Period

733.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARK STEPHENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6796

Amount of Each Disbursement this Period

8237.28

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

733.72

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARK STEPHENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6797**

Amount of Each Disbursement this Period

8246.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MARK STEPHENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6798**

Amount of Each Disbursement this Period

8237.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARK STEPHENSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6799**

Amount of Each Disbursement this Period

3803.43

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRATEGIC MARKETING & MAILING INC.**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

**Transaction ID : SB23.5760**

Amount of Each Disbursement this Period

50559.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRATEGIC MARKETING & MAILING INC.**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 10 / 2015

**Transaction ID : SB23.5761**

Amount of Each Disbursement this Period

46937.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRATEGIC MARKETING & MAILING INC.**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

**Transaction ID : SB23.5762**

Amount of Each Disbursement this Period

99907.75

☐ Memo Item

**Subtotal Of Receipts This Page** (optional)..... 197404.10

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRATEGIC MARKETING & MAILING INC.**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

**Transaction ID : SB23.5763**

Amount of Each Disbursement this Period

152137.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRATEGIC MARKETING & MAILING INC.**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5764**

Amount of Each Disbursement this Period

110278.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRATEGIC MARKETING & MAILING INC.**

Mailing Address PO BOX 6013

City  
CHAMPAIGN

State  
IL

Zip Code  
61826

Purpose of Disbursement  
DIRECT MAIL PRINTING AND POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.5765**

Amount of Each Disbursement this Period

127674.63

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

390090.50

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB23.5769

Amount of Each Disbursement this Period

13755.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5770

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

Transaction ID : SB23.5771

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

13785.39

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRIPE**

Mailing Address 529 14TH STREET NW #350

City  
WASHINGTON

State  
DC

Zip Code  
20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.5772

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRIPE**

Mailing Address 529 14TH STREET NW #350

City  
WASHINGTON

State  
DC

Zip Code  
20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5773

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRIPE**

Mailing Address 529 14TH STREET NW #350

City  
WASHINGTON

State  
DC

Zip Code  
20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.5774

Amount of Each Disbursement this Period

255.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

285.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRIPE**

Mailing Address 529 14TH STREET NW #350

City  
WASHINGTON

State  
DC

Zip Code  
20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5775

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRIPE**

Mailing Address 529 14TH STREET NW #350

City  
WASHINGTON

State  
DC

Zip Code  
20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.5776

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRIPE**

Mailing Address 529 14TH STREET NW #350

City  
WASHINGTON

State  
DC

Zip Code  
20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5777

Amount of Each Disbursement this Period

43620.54

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

43665.54

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

Transaction ID : SB23.5778

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

Transaction ID : SB23.5779

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.5780

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

165.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

Transaction ID : SB23.5781

Amount of Each Disbursement this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5782

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 21 / 2015

Transaction ID : SB23.5783

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

105.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 21 / 2015

Transaction ID : SB23.5784

Amount of Each Disbursement this Period

14839.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.5785

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STRIPE**

Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.5786

Amount of Each Disbursement this Period

14.80

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

14929.35

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6801

Amount of Each Disbursement this Period

5655.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6802

Amount of Each Disbursement this Period

6848.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6803

Amount of Each Disbursement this Period

6858.18

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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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)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6804**

Amount of Each Disbursement this Period

6848.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6805**

Amount of Each Disbursement this Period

6858.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6806**

Amount of Each Disbursement this Period

6848.53

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ASHLEE A STRONG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6807

Amount of Each Disbursement this Period

3245.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STUART & ASSOCIATES**

Mailing Address 15919 INDUSTRIAL PKWY

City State Zip Code  
CLEVELAND OH 44135

Purpose of Disbursement  
CAMPAIGN PROMOTIONAL ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5788

Amount of Each Disbursement this Period

30191.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STUART & ASSOCIATES**

Mailing Address 15919 INDUSTRIAL PKWY

City State Zip Code  
CLEVELAND OH 44135

Purpose of Disbursement  
CAMPAIGN PROMOTIONAL ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5789

Amount of Each Disbursement this Period

18343.60

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

48535.10

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. STUART & ASSOCIATES**

Mailing Address 15919 INDUSTRIAL PKWY

City CLEVELAND State OH Zip Code 44135

Purpose of Disbursement  
CAMPAIGN PROMOTIONAL ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5790

Amount of Each Disbursement this Period

1768.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. STUART & ASSOCIATES**

Mailing Address 15919 INDUSTRIAL PKWY

City CLEVELAND State OH Zip Code 44135

Purpose of Disbursement  
CAMPAIGN PROMOTIONAL ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.5791

Amount of Each Disbursement this Period

5981.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. STUDIO GEAR LLC**

Mailing Address 511 E CHICAGO ST

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5793

Amount of Each Disbursement this Period

200.45

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

7749.22

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 07/22 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 19 / 2015

Transaction ID : SB23.5796

Amount of Each Disbursement this Period

16.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 07/22 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5797

Amount of Each Disbursement this Period

26.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
MATEJOV 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5820

Amount of Each Disbursement this Period

49.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.5815**

Amount of Each Disbursement this Period

30.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.5823**

Amount of Each Disbursement this Period

6.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.5821**

Amount of Each Disbursement this Period

29.64

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2570 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

**Transaction ID : SB23.5798**

Amount of Each Disbursement this Period

9.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

**Transaction ID : SB23.5799**

Amount of Each Disbursement this Period

21.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
HIGGINS 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 25 / 2015

**Transaction ID : SB23.5816**

Amount of Each Disbursement this Period

27.90

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.5800

Amount of Each Disbursement this Period

6.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 02 / 2015

Transaction ID : SB23.5801

Amount of Each Disbursement this Period

4.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 02 / 2015

Transaction ID : SB23.5802

Amount of Each Disbursement this Period

23.63

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5803

Amount of Each Disbursement this Period

6.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.5804

Amount of Each Disbursement this Period

12.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
SMITH 9/9 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5824

Amount of Each Disbursement this Period

62.24

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.5810**

Amount of Each Disbursement this Period

37.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

**Transaction ID : SB23.5805**

Amount of Each Disbursement this Period

24.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 07 / 2015

**Transaction ID : SB23.5806**

Amount of Each Disbursement this Period

28.43

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
GROTH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 07 / 2015

**Transaction ID : SB23.5811**

Amount of Each Disbursement this Period

8.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
CONNELLY 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.5795**

Amount of Each Disbursement this Period

18.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.5807**

Amount of Each Disbursement this Period

14.56

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.5808**

Amount of Each Disbursement this Period

34.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.5814**

Amount of Each Disbursement this Period

4.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.5817**

Amount of Each Disbursement this Period

19.11

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SB23.5818**

Amount of Each Disbursement this Period

13.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
GROTH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

**Transaction ID : SB23.5812**

Amount of Each Disbursement this Period

6.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City State Zip Code  
MILFORD CT 06461

Purpose of Disbursement  
GROTH 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

**Transaction ID : SB23.5813**

Amount of Each Disbursement this Period

7.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
EVENSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 13 / 2015

**Transaction ID : SB23.5809**

Amount of Each Disbursement this Period

25.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 19 / 2015

**Transaction ID : SB23.5819**

Amount of Each Disbursement this Period

6.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUBWAY**

Mailing Address 325 BIC DR

City  
MILFORD

State  
CT

Zip Code  
06461

Purpose of Disbursement  
PETERSON 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 23 / 2015

**Transaction ID : SB23.5822**

Amount of Each Disbursement this Period

3.97

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SURG EVENTS**

Mailing Address 102 N WATER STREET

City State Zip Code  
MILWAUKEE WI 53202

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.5826**

Amount of Each Disbursement this Period

5389.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TARGET**

Mailing Address 1000 NICOLLET MALL

City State Zip Code  
MINNEAPOLIS MN 55403

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

**Transaction ID : SB23.5829**

Amount of Each Disbursement this Period

17.05

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TARGET**

Mailing Address 1000 NICOLLET MALL

City State Zip Code  
MINNEAPOLIS MN 55403

Purpose of Disbursement  
WAGAR 9/9 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

**Transaction ID : SB23.5831**

Amount of Each Disbursement this Period

40.81

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

5389.31

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TARGET**

Mailing Address 1000 NICOLLET MALL

City State Zip Code  
MINNEAPOLIS MN 55403

Purpose of Disbursement  
HAHN 09/24 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2015

Transaction ID : SB23.5830

Amount of Each Disbursement this Period

81.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TARGET**

Mailing Address 1000 NICOLLET MALL

City State Zip Code  
MINNEAPOLIS MN 55403

Purpose of Disbursement  
BERUBE 09/24 REIMBURSEMENT: OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 17 / 2015

Transaction ID : SB23.5828

Amount of Each Disbursement this Period

46.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TARGETED VICTORY LLC**

Mailing Address 1033 N FAIRFAX STREET #40

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.5833

Amount of Each Disbursement this Period

70745.84

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

70745.84

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TDS**

Mailing Address PO BOX 94510

City  
**PALATINE**

State  
**IL**

Zip Code  
**60094**

Purpose of Disbursement  
**INTERNET/TELEPHONE SERVICES**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.5835**

Amount of Each Disbursement this Period

15338.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TEX TUBB'S TACO PALACE**

Mailing Address 2009 ATWOOD AVE

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 09/08 PMT: MEETING EXPENSE: MEALS**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

**Transaction ID : SB23.5837**

Amount of Each Disbursement this Period

205.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THE COMMON MAN INN**

Mailing Address 231 MAIN ST.

City  
**PLYMOUTH**

State  
**NH**

Zip Code  
**53590**

Purpose of Disbursement  
**NEITZEL 09/17 REIMBURSEMENT: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 07 / 2015

**Transaction ID : SB23.5839**

Amount of Each Disbursement this Period

2467.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

15338.08

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# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THE CONCEPT WORKS INC.**

Mailing Address 1001 OFFICE PARK ROAD #119

City State Zip Code  
WEST DES MOINES IA 50265

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5841

Amount of Each Disbursement this Period

7988.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City State Zip Code  
ATLANTA GA 30339

Purpose of Disbursement  
AMEX 07/22 PMT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5843

Amount of Each Disbursement this Period

22.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City State Zip Code  
ATLANTA GA 30339

Purpose of Disbursement  
WETZEL 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 12 / 2015

Transaction ID : SB23.5849

Amount of Each Disbursement this Period

81.16

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

7988.34

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

Transaction ID : SB23.5846

Amount of Each Disbursement this Period

96.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5844

Amount of Each Disbursement this Period

21.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5848

Amount of Each Disbursement this Period

21.61

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
NEITZEL 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5847

Amount of Each Disbursement this Period

28.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THE HOME DEPOT**

Mailing Address 2455 PACES FERRY ROAD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 23 / 2015

Transaction ID : SB23.5845

Amount of Each Disbursement this Period

43.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THE LODGE AT MANITOWISH WATERS**

Mailing Address 13859 ILG ROAD

City MANITOWISH WATERS State WI Zip Code 54545

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5851

Amount of Each Disbursement this Period

137.49

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THE LODGE AT MANITOWISH WATERS**

Mailing Address 13859 ILG ROAD

City State Zip Code  
MANITOWISH WATERS WI 54545

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.5852

Amount of Each Disbursement this Period

137.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THE PARK CENTRAL SAN FRANCISCO**

Mailing Address 50 THIRD ST

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
OCZKOWSKI 08/07 REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB23.5854

Amount of Each Disbursement this Period

963.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. THE TARRANCE GROUP INC.**

Mailing Address 201 N UNION STREET #410

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5856

Amount of Each Disbursement this Period

35614.20

☐ Memo Item

Subtotal Of Receipts This Page (optional)..... 35614.20

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. THE UNION LEAGUE CLUB**

Mailing Address 38 EAST 37TH STREET

City  
NEW YORK

State  
NY

Zip Code  
10016

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.5857**

Amount of Each Disbursement this Period

4402.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THE WESTIN COPLEY PLACE**

Mailing Address 10 HUNTINGTON AVE

City  
BOSTON

State  
MA

Zip Code  
02116

Purpose of Disbursement  
WOOD 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SB23.5859**

Amount of Each Disbursement this Period

7576.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. REAGAN P THOMPSON**

Mailing Address 1802 PANKRATZ STREET

City  
MADISON

State  
WI

Zip Code  
53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6809**

Amount of Each Disbursement this Period

3017.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

4402.96

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. REAGAN P THOMPSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6810**

Amount of Each Disbursement this Period

3036.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. REAGAN P THOMPSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6811**

Amount of Each Disbursement this Period

3024.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. REAGAN P THOMPSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6812**

Amount of Each Disbursement this Period

3021.77

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. REAGAN P THOMPSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6813

Amount of Each Disbursement this Period

3012.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. REAGAN P THOMPSON**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6814

Amount of Each Disbursement this Period

1391.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TODD ENGLISH**

Mailing Address 2221 RICHARD ARRINGTON JR BLVD. N.

City State Zip Code  
BIRMINGHAM AL 35203

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.5862

Amount of Each Disbursement this Period

20.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TODD ENGLISH**

Mailing Address 2221 RICHARD ARRINGTON JR BLVD. N.

City State Zip Code  
BIRMINGHAM AL 35203

Purpose of Disbursement  
EVENSON 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.5861

Amount of Each Disbursement this Period

300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TOWN OF PETERBOROUGH**

Mailing Address 1 GROVE STREET

City State Zip Code  
PETERBOROUGH NH 03458

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.5864

Amount of Each Disbursement this Period

1540.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City State Zip Code  
GRAND RAPIDS MI 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 18 / 2015

Transaction ID : SB23.5866

Amount of Each Disbursement this Period

10522.95

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

12062.95

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5867

Amount of Each Disbursement this Period

9829.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5868

Amount of Each Disbursement this Period

28559.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5869

Amount of Each Disbursement this Period

4724.50

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

43113.10

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5870

Amount of Each Disbursement this Period

5001.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5871

Amount of Each Disbursement this Period

3128.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.5872

Amount of Each Disbursement this Period

196320.29

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

204450.15

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5873

Amount of Each Disbursement this Period

45.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5874

Amount of Each Disbursement this Period

3805.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5875

Amount of Each Disbursement this Period

8509.94

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

12360.26

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5876

Amount of Each Disbursement this Period

301.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.5877

Amount of Each Disbursement this Period

224.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TRANSAXT**

Mailing Address 190 MONROE AVENUE NW #500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement  
REVENUE SHARE & FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 28 / 2015

Transaction ID : SB23.5878

Amount of Each Disbursement this Period

581.35

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1107.88

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. KAREN TURK**

Mailing Address 4641 INGRAHAM STREET

City  
SAN DIEGO

State  
CA

Zip Code  
92109

Purpose of Disbursement  
IN-KIND: CATERING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.7049

Amount of Each Disbursement this Period

1922.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. TUSK PRODUCTIONS LLC**

Mailing Address 38 LAKEWOOD DRIVE

City  
DENVER

State  
NJ

Zip Code  
07834

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 16 / 2015

Transaction ID : SB23.5880

Amount of Each Disbursement this Period

5072.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. TVEYES INC.**

Mailing Address 1150 POST ROAD

City  
FAIRFIELD

State  
CT

Zip Code  
06824

Purpose of Disbursement  
RESEARCH FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.5882

Amount of Each Disbursement this Period

3600.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

10594.40

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. TWITTER INC.**

Mailing Address 1355 MARKET STREET #900

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.5884**

Amount of Each Disbursement this Period

9271.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WILEY 07/22 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SB23.5906**

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WILEY 07/22 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SB23.5907**

Amount of Each Disbursement this Period

41.41

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

9271.12

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.5886

Amount of Each Disbursement this Period

22.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

Transaction ID : SB23.5904

Amount of Each Disbursement this Period

22.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5887

Amount of Each Disbursement this Period

24.19

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.5888

Amount of Each Disbursement this Period

8.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.5889

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5890

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5891

Amount of Each Disbursement this Period

6.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WILEY 08/25 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5908

Amount of Each Disbursement this Period

78.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WILEY 08/25 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5909

Amount of Each Disbursement this Period

90.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND  
TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.5892

Amount of Each Disbursement this Period

35.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND  
TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.5893

Amount of Each Disbursement this Period

9.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND  
TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.5894

Amount of Each Disbursement this Period

26.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WILEY 08/25 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.5910

Amount of Each Disbursement this Period

102.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

Transaction ID : SB23.5895

Amount of Each Disbursement this Period

15.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
BREMBERG 08/07 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

Transaction ID : SB23.5896

Amount of Each Disbursement this Period

10.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
GALLAGHER 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 03 / 2015

Transaction ID : SB23.5899

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
GALLAGHER 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5900

Amount of Each Disbursement this Period

64.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
GALLAGHER 08/07 REIMBURSEMENT: TRAVEL: GROUND

TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5901

Amount of Each Disbursement this Period

20.76

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
GALLAGHER 08/07 REIMBURSEMENT: TRAVEL: GROUND  
TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.5902

Amount of Each Disbursement this Period

19.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WACLAWSKI 09/09 REIMBURSEMENT: TRAVEL: GROUND  
TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 15 / 2015

Transaction ID : SB23.5905

Amount of Each Disbursement this Period

52.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
DAY 09/24 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.5897

Amount of Each Disbursement this Period

8.15

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
DAY 09/24 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.5898**

Amount of Each Disbursement this Period

36.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WOOD 09/09 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

**Transaction ID : SB23.5911**

Amount of Each Disbursement this Period

47.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
HIGGINS 09/24 REIMBURSEMENT: TRAVEL: GROUND  
TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 08 / 2015

**Transaction ID : SB23.5903**

Amount of Each Disbursement this Period

8.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBER**

Mailing Address 405 HOWARD ST

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
VAJDICH 9/24 REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2025

Transaction ID : SB23.5912

Amount of Each Disbursement this Period

46.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UBER CONFERENCE**

Mailing Address 275 SACRAMENTO ST 4TH FLOOR

City State Zip Code  
SAN FRANCISCO CA 94111

Purpose of Disbursement  
EAGER 07/22 REIMBURSEMENT: CONFERENCE CALLS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 18 / 2015

Transaction ID : SB23.5914

Amount of Each Disbursement this Period

120.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UBER CONFERENCE**

Mailing Address 275 SACRAMENTO ST 4TH FLOOR

City State Zip Code  
SAN FRANCISCO CA 94111

Purpose of Disbursement  
EAGER 07/28 REIMBURSEMENT: CONFERENCE CALLS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.5915

Amount of Each Disbursement this Period

414.68

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UBERCONFERENCE**

Mailing Address 275 SACRAMENTO ST 4TH FLOOR

City State Zip Code  
SAN FRANCISCO CA 94111

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: CONFERENCE CALLS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.5917

Amount of Each Disbursement this Period

526.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5919

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5920

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City  
CHICAGO

State  
IL

Zip Code  
60606

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 26 / 2015

Transaction ID : SB23.5921

Amount of Each Disbursement this Period

405.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City  
CHICAGO

State  
IL

Zip Code  
60606

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.5922

Amount of Each Disbursement this Period

689.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City  
CHICAGO

State  
IL

Zip Code  
60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5923

Amount of Each Disbursement this Period

17.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5924

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5925

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5926

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5927

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5928

Amount of Each Disbursement this Period

355.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5929

Amount of Each Disbursement this Period

355.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5930

Amount of Each Disbursement this Period

355.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5931

Amount of Each Disbursement this Period

355.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5932

Amount of Each Disbursement this Period

355.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5933

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5934

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5935

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.5936

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5937

Amount of Each Disbursement this Period

246.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5938

Amount of Each Disbursement this Period

268.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5939

Amount of Each Disbursement this Period

268.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.5940

Amount of Each Disbursement this Period

207.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5941

Amount of Each Disbursement this Period

268.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : SB23.5942

Amount of Each Disbursement this Period

268.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5943

Amount of Each Disbursement this Period

268.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5944

Amount of Each Disbursement this Period

536.70

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5945

Amount of Each Disbursement this Period

69.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5946

Amount of Each Disbursement this Period

69.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5947

Amount of Each Disbursement this Period

69.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5948

Amount of Each Disbursement this Period

62.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5949

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5950

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5951

Amount of Each Disbursement this Period

471.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5952

Amount of Each Disbursement this Period

471.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5953

Amount of Each Disbursement this Period

471.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5954

Amount of Each Disbursement this Period

471.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5955

Amount of Each Disbursement this Period

471.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5956

Amount of Each Disbursement this Period

541.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5957

Amount of Each Disbursement this Period

507.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5958

Amount of Each Disbursement this Period

66.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.5959

Amount of Each Disbursement this Period

617.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.5975

Amount of Each Disbursement this Period

374.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.5976

Amount of Each Disbursement this Period

96.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5960

Amount of Each Disbursement this Period

-69.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5961

Amount of Each Disbursement this Period

-69.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5962

Amount of Each Disbursement this Period

-69.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5963

Amount of Each Disbursement this Period

-66.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5964

Amount of Each Disbursement this Period

-62.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5965

Amount of Each Disbursement this Period

-19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5966

Amount of Each Disbursement this Period

434.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5977

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5978

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5979

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

Transaction ID : SB23.5980

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 26 / 2015

Transaction ID : SB23.6034

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5967

Amount of Each Disbursement this Period

4.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5968

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.5969

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

Transaction ID : SB23.5981

Amount of Each Disbursement this Period

362.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.5982**

Amount of Each Disbursement this Period

362.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.5983**

Amount of Each Disbursement this Period

362.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SB23.5984**

Amount of Each Disbursement this Period

362.10

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5985

Amount of Each Disbursement this Period

634.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5986

Amount of Each Disbursement this Period

594.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.5987

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6035

Amount of Each Disbursement this Period

218.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.5970

Amount of Each Disbursement this Period

634.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5988

Amount of Each Disbursement this Period

543.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.5989

Amount of Each Disbursement this Period

311.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.5971

Amount of Each Disbursement this Period

296.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.5972

Amount of Each Disbursement this Period

296.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5973

Amount of Each Disbursement this Period

746.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5990

Amount of Each Disbursement this Period

727.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5991

Amount of Each Disbursement this Period

24.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.5992

Amount of Each Disbursement this Period

26.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 09 / 2015

Transaction ID : SB23.6036

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5993

Amount of Each Disbursement this Period

148.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.5994**

Amount of Each Disbursement this Period

148.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.5995**

Amount of Each Disbursement this Period

543.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

**Transaction ID : SB23.5996**

Amount of Each Disbursement this Period

54.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 10 / 2015

Transaction ID : SB23.5997

Amount of Each Disbursement this Period

52.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.5974

Amount of Each Disbursement this Period

608.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.5998

Amount of Each Disbursement this Period

359.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.5999

Amount of Each Disbursement this Period

89.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.6000

Amount of Each Disbursement this Period

23.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

Transaction ID : SB23.6001

Amount of Each Disbursement this Period

217.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2633 / 2740

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.6002

Amount of Each Disbursement this Period

279.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.6003

Amount of Each Disbursement this Period

279.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.6004

Amount of Each Disbursement this Period

279.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.6005

Amount of Each Disbursement this Period

279.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.6006

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 17 / 2015

Transaction ID : SB23.6007

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.6008

Amount of Each Disbursement this Period

319.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.6009

Amount of Each Disbursement this Period

319.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.6010

Amount of Each Disbursement this Period

32.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6011

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6012

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6013

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6014

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6015

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6016

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.6017

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.6018

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.6019

Amount of Each Disbursement this Period

200.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 22 / 2015

Transaction ID : SB23.6020

Amount of Each Disbursement this Period

-200.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 22 / 2015

Transaction ID : SB23.6021

Amount of Each Disbursement this Period

608.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6022

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6023

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6024

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6025

Amount of Each Disbursement this Period

47.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2641 / 2740

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6026

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6027

Amount of Each Disbursement this Period

56.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6028

Amount of Each Disbursement this Period

26.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2642 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6029

Amount of Each Disbursement this Period

467.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6030

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6031

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2643 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6032

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 24 / 2015

Transaction ID : SB23.6033

Amount of Each Disbursement this Period

465.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

Transaction ID : SB23.6037

Amount of Each Disbursement this Period

573.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.6038

Amount of Each Disbursement this Period

409.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
OCZKOWSKI 9/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.6042

Amount of Each Disbursement this Period

500.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.6039

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 31 / 2015

Transaction ID : SB23.6040

Amount of Each Disbursement this Period

324.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 01 / 2015

Transaction ID : SB23.6041

Amount of Each Disbursement this Period

423.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 05 / 2015

Transaction ID : SB23.6044

Amount of Each Disbursement this Period

484.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
AMEX 07/22 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 05 / 2015

Transaction ID : SB23.6045

Amount of Each Disbursement this Period

484.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 18 / 2015

Transaction ID : SB23.6147

Amount of Each Disbursement this Period

753.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 23 / 2015

Transaction ID : SB23.6148

Amount of Each Disbursement this Period

198.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 25 / 2015

Transaction ID : SB23.6149

Amount of Each Disbursement this Period

332.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6150

Amount of Each Disbursement this Period

542.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB23.6151

Amount of Each Disbursement this Period

521.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
AMEX 08/19 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2015

Transaction ID : SB23.6046

Amount of Each Disbursement this Period

181.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.6047

Amount of Each Disbursement this Period

344.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.6048

Amount of Each Disbursement this Period

462.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.6049

Amount of Each Disbursement this Period

610.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 07 / 2015

Transaction ID : SB23.6050

Amount of Each Disbursement this Period

366.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6051

Amount of Each Disbursement this Period

658.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6052

Amount of Each Disbursement this Period

658.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6053

Amount of Each Disbursement this Period

658.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6054

Amount of Each Disbursement this Period

658.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6055

Amount of Each Disbursement this Period

658.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
SMITH 08/07 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

Transaction ID : SB23.6157

Amount of Each Disbursement this Period

210.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6056

Amount of Each Disbursement this Period

190.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6057

Amount of Each Disbursement this Period

560.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6058

Amount of Each Disbursement this Period

336.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6059

Amount of Each Disbursement this Period

336.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6060**

Amount of Each Disbursement this Period

336.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6061**

Amount of Each Disbursement this Period

271.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6062**

Amount of Each Disbursement this Period

271.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6063

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6064

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6065

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6066

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6067

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

Transaction ID : SB23.6068

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6069**

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SB23.6070**

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SB23.6152**

Amount of Each Disbursement this Period

173.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6071

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6072

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6073

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6074

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6075

Amount of Each Disbursement this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6076

Amount of Each Disbursement this Period

777.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6077

Amount of Each Disbursement this Period

777.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6078

Amount of Each Disbursement this Period

777.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

Transaction ID : SB23.6079

Amount of Each Disbursement this Period

777.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SB23.6080**

Amount of Each Disbursement this Period

777.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SB23.6081**

Amount of Each Disbursement this Period

26.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SB23.6082**

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 29 / 2015

Transaction ID : SB23.6083

Amount of Each Disbursement this Period

679.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6084

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6085

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6086

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6087

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6088

Amount of Each Disbursement this Period

477.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6089

Amount of Each Disbursement this Period

477.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6090

Amount of Each Disbursement this Period

477.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6091

Amount of Each Disbursement this Period

477.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB23.6153

Amount of Each Disbursement this Period

140.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.6092

Amount of Each Disbursement this Period

380.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 04 / 2015

Transaction ID : SB23.6093

Amount of Each Disbursement this Period

380.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.6094

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.6095

Amount of Each Disbursement this Period

477.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.6096

Amount of Each Disbursement this Period

-49.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 08 / 2015

Transaction ID : SB23.6154

Amount of Each Disbursement this Period

511.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6097

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6098

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.6099**

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.6100**

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SB23.6101**

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6102

Amount of Each Disbursement this Period

311.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6103

Amount of Each Disbursement this Period

311.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6104

Amount of Each Disbursement this Period

311.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 11 / 2015

Transaction ID : SB23.6105

Amount of Each Disbursement this Period

590.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.6106

Amount of Each Disbursement this Period

338.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.6107

Amount of Each Disbursement this Period

338.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 12 2015

**Transaction ID : SB23.6108**

Amount of Each Disbursement this Period

338.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 12 2015

**Transaction ID : SB23.6109**

Amount of Each Disbursement this Period

338.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 12 2015

**Transaction ID : SB23.6110**

Amount of Each Disbursement this Period

338.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2671 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.6111

Amount of Each Disbursement this Period

394.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6112

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6113

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 2672 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6114

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6115

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6116

Amount of Each Disbursement this Period

444.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6117

Amount of Each Disbursement this Period

444.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6118

Amount of Each Disbursement this Period

444.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6119

Amount of Each Disbursement this Period

444.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6120

Amount of Each Disbursement this Period

444.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6121

Amount of Each Disbursement this Period

444.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6122

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6123

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6124

Amount of Each Disbursement this Period

273.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6125

Amount of Each Disbursement this Period

37.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6126

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6127

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6128

Amount of Each Disbursement this Period

263.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6129

Amount of Each Disbursement this Period

223.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6130

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6131

Amount of Each Disbursement this Period

223.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6132

Amount of Each Disbursement this Period

37.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6133

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6134

Amount of Each Disbursement this Period

263.60

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6135

Amount of Each Disbursement this Period

223.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6136

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6137

Amount of Each Disbursement this Period

223.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2680 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6138**

Amount of Each Disbursement this Period

238.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6139**

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6140**

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6141

Amount of Each Disbursement this Period

223.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6142

Amount of Each Disbursement this Period

37.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

Transaction ID : SB23.6143

Amount of Each Disbursement this Period

18.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

SCOTT WALKER INC

Full Name (Last, First, Middle Initial)

### A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6144

Amount of Each Disbursement this Period

22.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6145

Amount of Each Disbursement this Period

263.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6146

Amount of Each Disbursement this Period

223.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 26 / 2015

Transaction ID : SB23.6155

Amount of Each Disbursement this Period

231.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 29 / 2015

Transaction ID : SB23.6158

Amount of Each Disbursement this Period

255.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
GALLATIN 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 05 / 2015

Transaction ID : SB23.6156

Amount of Each Disbursement this Period

545.10

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
WILEY 09/24 REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 23 / 2015

Transaction ID : SB23.6159

Amount of Each Disbursement this Period

86.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 02 / 2015

Transaction ID : SB23.6161

Amount of Each Disbursement this Period

8.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.6162

Amount of Each Disbursement this Period

9.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
CRUZ 09/24 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 21 / 2015

**Transaction ID : SB23.6163**

Amount of Each Disbursement this Period

5.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
MARTIN 08/07 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2015

**Transaction ID : SB23.6170**

Amount of Each Disbursement this Period

10.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
VETTER 09/24 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SB23.6171**

Amount of Each Disbursement this Period

5.95

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City  
WASHINGTON

State  
DC

Zip Code  
20024

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 12 / 2015

Transaction ID : SB23.6167

Amount of Each Disbursement this Period

17.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City  
WASHINGTON

State  
DC

Zip Code  
20024

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.6164

Amount of Each Disbursement this Period

99.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City  
WASHINGTON

State  
DC

Zip Code  
20024

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 18 / 2015

Transaction ID : SB23.6168

Amount of Each Disbursement this Period

21.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 19 2015

Transaction ID : SB23.6165

Amount of Each Disbursement this Period

294.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
HIGGINS 09/09 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 01 2015

Transaction ID : SB23.6169

Amount of Each Disbursement this Period

10.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
HAHN 09/24 REIMBURSEMENT: POSTAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 17 2015

Transaction ID : SB23.6166

Amount of Each Disbursement this Period

17.25

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. USPS PO BOXES**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20260

Purpose of Disbursement  
DINERS CLUB MASTERCARD 08/19 PMT: FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 14 / 2015

Transaction ID : SB23.6174

Amount of Each Disbursement this Period

155.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. USPS PO BOXES**

Mailing Address 475 L'ENFANT PLAZA SW

City State Zip Code  
WASHINGTON DC 20260

Purpose of Disbursement  
FADNESS 9/9 REIMBURSEMENT: FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 20 / 2015

Transaction ID : SB23.6173

Amount of Each Disbursement this Period

208.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANIEL P VAJDICH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6816

Amount of Each Disbursement this Period

2552.47

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANIEL P VAJDICH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6817

Amount of Each Disbursement this Period

3516.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DANIEL P VAJDICH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6818

Amount of Each Disbursement this Period

3489.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DANIEL P VAJDICH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6819

Amount of Each Disbursement this Period

3500.07

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. DANIEL P VAJDICH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6820

Amount of Each Disbursement this Period

3475.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. DANIEL P VAJDICH**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6821

Amount of Each Disbursement this Period

1601.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. VERIZON WIRELESS**

Mailing Address PO BOX 25505

City State Zip Code  
LEHIGH VALLEY PA 18002

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: MOBILE PHONE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6176

Amount of Each Disbursement this Period

1347.90

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## A. VERIZON WIRELESS

Mailing Address PO BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002

Purpose of Disbursement  
MOBILE PHONE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.6177

Amount of Each Disbursement this Period

1462.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

## B. VERIZON WIRELESS

Mailing Address PO BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002

Purpose of Disbursement  
MOBILE PHONE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.6178

Amount of Each Disbursement this Period

1433.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

## C. SAM VETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.7026

Amount of Each Disbursement this Period

1340.79

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

4237.18

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. SAMUEL G VETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6823

Amount of Each Disbursement this Period

1966.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. SAMUEL G VETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6824

Amount of Each Disbursement this Period

2172.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SAMUEL G VETTER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6825

Amount of Each Disbursement this Period

2162.45

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

### A. SAMUEL G VETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6826

Amount of Each Disbursement this Period

2172.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

### B. SAMUEL G VETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6827

Amount of Each Disbursement this Period

2152.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

### C. SAMUEL G VETTER

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6828

Amount of Each Disbursement this Period

994.65

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. VILLAGE GRAPHICS PRINTING LLC**

Mailing Address 108 W CAPITOL DRIVE

City  
HARTLAND

State  
WI

Zip Code  
53029

Purpose of Disbursement  
PRINTING AND DESIGN SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6180**

Amount of Each Disbursement this Period

498.86

☐ 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 AND DESIGN SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6181**

Amount of Each Disbursement this Period

3022.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. VILLAGE GRAPHICS PRINTING LLC**

Mailing Address 108 W CAPITOL DRIVE

City  
HARTLAND

State  
WI

Zip Code  
53029

Purpose of Disbursement  
PRINTING AND DESIGN SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6182**

Amount of Each Disbursement this Period

4108.59

☐ Memo Item

**Subtotal Of Receipts This Page** (optional).....

7630.39

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. VIZR INC.**

Mailing Address 259 TOPEKA AVENUE

City State Zip Code  
SAN FRANCISCO CA 94124

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6184

Amount of Each Disbursement this Period

7250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. VIZR INC.**

Mailing Address 259 TOPEKA AVENUE

City State Zip Code  
SAN FRANCISCO CA 94124

Purpose of Disbursement  
TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.6185

Amount of Each Disbursement this Period

14575.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6830

Amount of Each Disbursement this Period

7615.99

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

21825.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2696 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6831

Amount of Each Disbursement this Period

8344.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6832

Amount of Each Disbursement this Period

8368.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6833

Amount of Each Disbursement this Period

8344.17

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6834

Amount of Each Disbursement this Period

8368.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.7028

Amount of Each Disbursement this Period

896.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6835

Amount of Each Disbursement this Period

8344.17

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

896.74

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.7029**

Amount of Each Disbursement this Period

522.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONATHAN J WACLAWSKI**

Mailing Address 1111 ORONOCO STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6836**

Amount of Each Disbursement this Period

8224.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MARK WAGAR**

Mailing Address 2307 FENTON PARKWAY

City State Zip Code  
SAN DIEGO CA 92108

Purpose of Disbursement  
WAGAR 9/9 REIMBURSEMENT: PER DIEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 16 / 2015

**Transaction ID : SB23.6890**

Amount of Each Disbursement this Period

300.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

522.61

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MARK WAGAR**

Mailing Address 2307 FENTON PARKWAY

City  
**SAN DIEGO**

State  
**CA**

Zip Code  
**92108**

Purpose of Disbursement  
**REIMBURSEMENT: SEE MEMO ENTRIES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SB23.7030**

Amount of Each Disbursement this Period

355.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6838**

Amount of Each Disbursement this Period

758.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6841**

Amount of Each Disbursement this Period

768.55

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

355.76

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6843**

Amount of Each Disbursement this Period

773.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6845**

Amount of Each Disbursement this Period

768.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6847**

Amount of Each Disbursement this Period

773.87

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6849**

Amount of Each Disbursement this Period

768.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALEXANDER N WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6851**

Amount of Each Disbursement this Period

211.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6840**

Amount of Each Disbursement this Period

763.33

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6842**

Amount of Each Disbursement this Period

768.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6844**

Amount of Each Disbursement this Period

773.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6846**

Amount of Each Disbursement this Period

768.55

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6848**

Amount of Each Disbursement this Period

773.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6850**

Amount of Each Disbursement this Period

768.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MATTHEW DAVID WALKER**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6852**

Amount of Each Disbursement this Period

211.97

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.6191**

Amount of Each Disbursement this Period

2.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.6192**

Amount of Each Disbursement this Period

29.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**LUKACH 09/09 REIMBURSEMENT: OFFICE SUPPLIES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.6199**

Amount of Each Disbursement this Period

18.54

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6195

Amount of Each Disbursement this Period

16.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6196

Amount of Each Disbursement this Period

8.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
MARTIN 08/07 REIMBURSEMENT: EVENT STAGING EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6200

Amount of Each Disbursement this Period

44.18

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**HERSHNER 08/07 REIMBURSEMENT: TRAVEL: OTHER**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SB23.6198**

Amount of Each Disbursement this Period

13.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**CRUZ 09/24 REIMBURSEMENT: MEETING EXPENSE: MEALS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SB23.6189**

Amount of Each Disbursement this Period

115.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**CRUZ 09/24 REIMBURSEMENT: MEETING EXPENSE: MEALS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SB23.6190**

Amount of Each Disbursement this Period

60.81

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
RHODEN 08/07 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 27 / 2015

Transaction ID : SB23.6203

Amount of Each Disbursement this Period

18.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : SB23.6193

Amount of Each Disbursement this Period

24.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
BERUBE 08/07 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.6187

Amount of Each Disbursement this Period

20.20

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WALMART**

Mailing Address 702 SW 8TH ST

City State Zip Code  
BENTONVILLE AR 72716

Purpose of Disbursement  
CORNELL 09/09 REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 06 / 2015

Transaction ID : SB23.6188

Amount of Each Disbursement this Period

40.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WALMART**

Mailing Address 702 SW 8TH ST

City State Zip Code  
BENTONVILLE AR 72716

Purpose of Disbursement  
GALLATIN 09/09 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 21 / 2015

Transaction ID : SB23.6194

Amount of Each Disbursement this Period

21.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WALMART**

Mailing Address 702 SW 8TH ST

City State Zip Code  
BENTONVILLE AR 72716

Purpose of Disbursement  
HANNA 09/24 REIMBURSEMENT: TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 27 / 2015

Transaction ID : SB23.6197

Amount of Each Disbursement this Period

17.18

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**YOUNG 09/24 REIMBURSEMENT: OFFICE SUPPLIES**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 04 / 2015

**Transaction ID : SB23.6204**

Amount of Each Disbursement this Period

6.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**NEITZEL 09/24 REIMBURSEMENT: OFFICE SUPPLIES**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SB23.6201**

Amount of Each Disbursement this Period

46.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WALMART**

Mailing Address 702 SW 8TH ST

City  
**BENTONVILLE**

State  
**AR**

Zip Code  
**72716**

Purpose of Disbursement  
**NEITZEL 09/24 REIMBURSEMENT: OFFICE SUPPLIES**

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SB23.6202**

Amount of Each Disbursement this Period

13.36

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WASTE MANAGEMENT**

Mailing Address PO BOX 4648

City  
**CAROL STREAM**

State  
**IL**

Zip Code  
**60197**

Purpose of Disbursement  
**UTILITIES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SB23.6206**

Amount of Each Disbursement this Period

1015.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6854**

Amount of Each Disbursement this Period

3359.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City  
**MADISON**

State  
**WI**

Zip Code  
**53704**

Purpose of Disbursement  
**INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6855**

Amount of Each Disbursement this Period

3692.95

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

1015.75

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6856**

Amount of Each Disbursement this Period

4375.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6857**

Amount of Each Disbursement this Period

3917.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPERITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6858**

Amount of Each Disbursement this Period

3941.97

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6859**

Amount of Each Disbursement this Period

3917.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ANNE ALLEN WELDEN**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6860**

Amount of Each Disbursement this Period

1832.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WEST COAST AUDIO VISUAL LLC**

Mailing Address 1545 INDUSTRIAL WAY

City State Zip Code  
SPARKS NV 89431

Purpose of Disbursement  
EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 19 / 2015

**Transaction ID : SB23.6208**

Amount of Each Disbursement this Period

215.45

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

215.45

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WESTIN HOTEL**

Mailing Address **ONE STARPOINT**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06902**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6210**

Amount of Each Disbursement this Period

787.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WESTIN HOTEL**

Mailing Address **ONE STARPOINT**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06902**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6211**

Amount of Each Disbursement this Period

607.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WESTIN HOTEL**

Mailing Address **ONE STARPOINT**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06902**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6212**

Amount of Each Disbursement this Period

393.57

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WESTIN HOTEL**

Mailing Address **ONE STARPOINT**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06902**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6213**

Amount of Each Disbursement this Period

393.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WESTIN HOTEL**

Mailing Address **ONE STARPOINT**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06902**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6214**

Amount of Each Disbursement this Period

393.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WESTIN HOTEL**

Mailing Address **ONE STARPOINT**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06902**

Purpose of Disbursement  
**DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.6215**

Amount of Each Disbursement this Period

393.57

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

0.00

**Total This Period** (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WESTIN HOTEL**

Mailing Address ONE STARPOINT

City  
STAMFORD

State  
CT

Zip Code  
06902

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/28: TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6216

Amount of Each Disbursement this Period

393.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WESTMARK PROPERTIES INC.**

Mailing Address 3328 109TH STREET

City  
URBANDALE

State  
IA

Zip Code  
50322

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

Transaction ID : SB23.6218

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WESTMARK PROPERTIES INC.**

Mailing Address 3328 109TH STREET

City  
URBANDALE

State  
IA

Zip Code  
50322

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 05 / 2015

Transaction ID : SB23.6219

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

12000.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WESTMARK PROPERTIES INC.**

Mailing Address 3328 109TH STREET

City URBANDALE State IA Zip Code 50322

Purpose of Disbursement  
RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.6220

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WESTMARK PROPERTIES INC.**

Mailing Address 3328 109TH STREET

City URBANDALE State IA Zip Code 50322

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 03 / 2015

Transaction ID : SB23.6221

Amount of Each Disbursement this Period

568.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6862

Amount of Each Disbursement this Period

3089.05

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

6568.86

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6863**

Amount of Each Disbursement this Period

4244.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.7033**

Amount of Each Disbursement this Period

279.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6864**

Amount of Each Disbursement this Period

4206.37

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

279.26

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6865

Amount of Each Disbursement this Period

4224.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.7034

Amount of Each Disbursement this Period

138.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6866

Amount of Each Disbursement this Period

4077.29

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

138.80

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

Transaction ID : SB23.7035

Amount of Each Disbursement this Period

524.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JONATHAN WETZEL**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6867

Amount of Each Disbursement this Period

3972.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WI DEPT OF ADMINISTRATION**

Mailing Address PO BOX 7864

City MADISON State WI Zip Code 53707

Purpose of Disbursement  
SECURITY SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB23.6223

Amount of Each Disbursement this Period

14377.62

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

14901.78

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WILAND INC.**

Mailing Address 6309 MONARCH PARK PLACE

City State Zip Code  
NIWOT CO 80503

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6228**

Amount of Each Disbursement this Period

17684.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WILDWOOD LODGE - PEWAUKEE**

Mailing Address N14 TOWER PL# W24121

City State Zip Code  
PEWAUKEE WI 53072

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SB23.6230**

Amount of Each Disbursement this Period

7834.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SB23.6869**

Amount of Each Disbursement this Period

7396.99

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

17684.58

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

**Transaction ID : SB23.6870**

Amount of Each Disbursement this Period

8119.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SB23.6871**

Amount of Each Disbursement this Period

8129.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

**Transaction ID : SB23.6872**

Amount of Each Disbursement this Period

8119.77

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.6873**

Amount of Each Disbursement this Period

8129.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6874**

Amount of Each Disbursement this Period

8119.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RICHARD J WILEY**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6875**

Amount of Each Disbursement this Period

3895.36

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. RICK WILEY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SB23.7037**

Amount of Each Disbursement this Period

822.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RICK WILEY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

**Transaction ID : SB23.7038**

Amount of Each Disbursement this Period

1171.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RICK WILEY**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.7039**

Amount of Each Disbursement this Period

4756.74

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

6750.26

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WIN RIGHT DATA COMPANY LLC**

Mailing Address 1252 RAMBLING RILL CIRCLE

City  
**STATHAM**

State  
**GA**

Zip Code  
**30666**

Purpose of Disbursement  
**DIRECT MAIL PRINTING AND POSTAGE**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6232**

Amount of Each Disbursement this Period

8963.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WISCONSIN CLUB**

Mailing Address 900 W WISCONSIN AVE

City  
**MILWAUKEE**

State  
**WI**

Zip Code  
**53233**

Purpose of Disbursement  
**FACILITY RENTAL/CATERING SERVICES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SB23.6234**

Amount of Each Disbursement this Period

2726.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. WISCONSIN COACHLINES**

Mailing Address 1520 ARCADIAN AVENUE

City  
**WAUKESHA**

State  
**WI**

Zip Code  
**53186**

Purpose of Disbursement  
**TRAVEL: GROUND TRANSPORTATION**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

**Transaction ID : SB23.6236**

Amount of Each Disbursement this Period

250.00

☒ Memo Item

**Subtotal Of Receipts This Page** (optional).....

11689.68

**Total This Period** (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. WISTIA INC**

Mailing Address 17 TUDOR STREET

City State Zip Code  
CAMBRIDGE MA 02139

Purpose of Disbursement  
DINERS CLUB MASTERCARD 07/23: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 06 / 2015

Transaction ID : SB23.6238

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WISTIA INC**

Mailing Address 17 TUDOR STREET

City State Zip Code  
CAMBRIDGE MA 02139

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/08 PMT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 25 / 2015

Transaction ID : SB23.6239

Amount of Each Disbursement this Period

300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 06/30 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 30 / 2015

Transaction ID : SB23.6877

Amount of Each Disbursement this Period

4065.50

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/15 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB23.6878

Amount of Each Disbursement this Period

4463.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 07/31 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6879

Amount of Each Disbursement this Period

4488.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB23.7040

Amount of Each Disbursement this Period

8217.27

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

8217.27

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6880

Amount of Each Disbursement this Period

4463.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6881

Amount of Each Disbursement this Period

4488.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB23.7041

Amount of Each Disbursement this Period

1149.14

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1149.14

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

**Transaction ID : SB23.6882**

Amount of Each Disbursement this Period

4463.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 24 / 2015

**Transaction ID : SB23.7042**

Amount of Each Disbursement this Period

234.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ALDEN WOOD**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SB23.6883**

Amount of Each Disbursement this Period

2085.23

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

234.41

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MONICA E YOUNG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/13 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6885

Amount of Each Disbursement this Period

2767.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. MONICA E YOUNG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 08/28 PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2015

Transaction ID : SB23.6886

Amount of Each Disbursement this Period

2796.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MONICA E YOUNG**

Mailing Address 1802 PANKRATZ STREET

City State Zip Code  
MADISON WI 53704

Purpose of Disbursement  
INSPIRITY 09/14 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB23.6887

Amount of Each Disbursement this Period

2786.92

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. MONICA E YOUNG**

Mailing Address 1802 PANKRATZ STREET

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
INSPIRITY 09/30 PMT: PAYROLL/TAXES & BENEFITS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2015

Transaction ID : SB23.6888

Amount of Each Disbursement this Period

1282.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ZOHO CORP**

Mailing Address 4141 HACIENDA DRIVE

City PLEASANTON State CA Zip Code 94588

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 13 / 2015

Transaction ID : SB23.6241

Amount of Each Disbursement this Period

99.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ZOHO CORP**

Mailing Address 4141 HACIENDA DRIVE

City PLEASANTON State CA Zip Code 94588

Purpose of Disbursement  
DINERS CLUB MASTERCARD 09/03 PMT: TECHNICAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 31 / 2015

Transaction ID : SB23.6243

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2731 / 2740

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ZOHO CORP**

Mailing Address 4141 HACIENDA DRIVE

City  
PLEASANTON

State  
CA

Zip Code  
94588

Purpose of Disbursement  
BOLDING 09/24 REIMBURSEMENT: TECHNICAL SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 13 / 2015

Transaction ID : SB23.6242

Amount of Each Disbursement this Period

99.00

☒ Memo Item

## **B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

## **C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

6370531.40

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2732 / 2740

☐ 23   ☐ 24   ☐ 25   ☐ 26   ☐ 27a  
☐ 27b   ☒ 28a   ☐ 28b   ☐ 28c   ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. ERIC BORGERDING**

Mailing Address 325 GLACIER RIDGE TR

City  
VERONA

State  
WI

Zip Code  
53593

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 08 / 21 / 2015

Transaction ID : SB28A.6905

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JUDITH COURI**

Mailing Address 1215 SEITZ DR

City  
WAUKESHA

State  
WI

Zip Code  
53186

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 08 / 21 / 2015

Transaction ID : SB28A.6917

Amount of Each Disbursement this Period

510.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ANDREW DAVIS**

Mailing Address 2525 S SHORE DRIVE, 7C

City  
MILWAUKEE

State  
WI

Zip Code  
53207

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 08 / 21 / 2015

Transaction ID : SB28A.6921

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1760.00

Total This Period (last page this line number only).....



# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 23   ☐ 24   ☐ 25   ☐ 26   ☐ 27a  
☐ 27b   ☒ 28a   ☐ 28b   ☐ 28c   ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## A. JULIANNE GUBASH

Mailing Address 1380 25TH STREET

City  
HOULTON

State  
WI

Zip Code  
54082

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 09 / 11 / 2015

Transaction ID : SB28A.6952

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## B. CURT HAMES

Mailing Address PO BOX 217

City  
MARION

State  
IA

Zip Code  
52302

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 07 / 09 / 2015

Transaction ID : SB28A.6956

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## C. CLAUDIA SMITH

Mailing Address 1020 VICTORIAN LN

City  
PLOVER

State  
WI

Zip Code  
54467

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 09 / 02 / 2015

Transaction ID : SB28A.7016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

8700.00

Total This Period (last page this line number only).....

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 23   ☐ 24   ☐ 25   ☐ 26   ☐ 27a  
☐ 27b   ☒ 28a   ☐ 28b   ☐ 28c   ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

**A. DONNA STEPHENSON**

Mailing Address PO BOX 43326

City  
ATLANTA

State  
GA

Zip Code  
30336

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2015

**Transaction ID : SB28A.7018**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JAMES STEPHENSON**

Mailing Address PO BOX 43326

City  
ATLANTA

State  
GA

Zip Code  
30336

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2015

**Transaction ID : SB28A.7020**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

5400.00

**Total This Period (last page this line number only)**.....

15860.00

# **SCHEDULE B-P** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☒ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF DOUG EVERETT**

Mailing Address 24105 PLANTATION DRIVE NE

City ATLANTA State GA Zip Code 30324

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 09 / 2015

Transaction ID : SB28C.4907

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

☐ 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

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

5000.00

Total This Period (last page this line number only).....

5000.00

**SCHEDULE D-P****DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 2736 / 2740

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**CONNECTIVIST MEDIA**Nature of Debt (Purpose):  
**ONLINE ADVERTISING**Mailing Address **544 E OGDEN AVE**

#700-161

City State  
**MILWAUKEE**Zip Code  
**WI 53202**

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD12.4105**

Amount Incurred This Period

34052.63

Payment This Period

0.00

Outstanding Balance at Close of This Period

34052.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**EXACT DRIVE INC.**Nature of Debt (Purpose):  
**ONLINE ADVERTISING**Mailing Address **PO BOX 1575**City State  
**MINNEAPOLIS**Zip Code  
**MN 55480**

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD12.4107**

Amount Incurred This Period

42228.67

Payment This Period

0.00

Outstanding Balance at Close of This Period

42228.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**INSTY-PRINTS**Nature of Debt (Purpose):  
**PRINTING AND DESIGN SERVICES**Mailing Address **2 E MIFFLIN STREET**City  
**MADISON**State Zip Code  
**WI 53703**

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD12.4109**

Amount Incurred This Period

1079.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

1079.25

- 1) **SUBTOTALS** This Period This Page (optional) .....
- 2) **TOTALS** This Period (last page this line number only) .....
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

77360.55

**SCHEDULE D-P****DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 2737 / 2740

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MAJIC PRODUCTIONS INC.**Nature of Debt (Purpose):  
**EVENT STAGING EXPENSE**

Mailing Address 21365 GATEWAY COURT

#100

City State

BROOKFIELD

Zip Code

WI

53045

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4111

Amount Incurred This Period

630.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**MARA DARROW PHOTOGRAPHY**Nature of Debt (Purpose):  
**PHOTOGRAPHY SERVICES**

Mailing Address 6821 VALHALLA WAY

City State

WINDERMERE

Zip Code

FL

34786

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4113

Amount Incurred This Period

2431.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2431.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**MASENG COMMUNICATIONS**Nature of Debt (Purpose):  
**COMMUNICATIONS CONSULTING**

Mailing Address 11309 BAROQUE ROAD

City State

SILVER SPRING

Zip Code

MD

20901

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4125

Amount Incurred This Period

10000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

1) **SUBTOTALS** This Period This Page (optional) .....

13061.60

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D-P****DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 2738 / 2740

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

**SCOTT WALKER INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**MMA EVENTS LLC**

Nature of Debt (Purpose):

**EVENT STAGING EXPENSE**

Mailing Address 1851 SOUTH CLUB DRIVE

City State

HYATTSVILLE

Zip Code

MD

20785

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4115

Amount Incurred This Period

44240.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44240.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**STREETER PRINTING**

Nature of Debt (Purpose):

**PRINTING AND DESIGN SERVICE**

Mailing Address 9880 VIA PASAR

SUITE C

City State

SAN DIEGO

Zip Code

CA

92126

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4117

Amount Incurred This Period

1715.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

1715.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE UNION LEAGUE CLUB**

Nature of Debt (Purpose):

**FACILITY RENTAL/CATERING SERVICES**

Mailing Address 38 EAST 37TH STREET

City

NEW YORK

State

NY

Zip Code

10016

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4119

Amount Incurred This Period

8479.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

8479.43

1) **SUBTOTALS** This Period This Page (optional) .....

54435.13

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SD12  
Transaction ID : SD12.4119

Line 12 'Amount Incurred This Period' value for The Union League Club reflects an administrative correction of - \$507.34 to the outstanding invoice from previously reported balance.

Form/Schedule:  
Transaction ID:

**SCHEDULE D-P****DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 2740 / 2740

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
**SCOTT WALKER INC**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**WAUKESHA COUNTY EXPO CENTER**Nature of Debt (Purpose):  
**FACILITY RENTAL**

Mailing Address 1000 NORTHVIEW ROAD

City State Zip Code  
WAUKESHA WI 53188

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4121

Amount Incurred This Period

10471.17

Payment This Period

0.00

Outstanding Balance at Close of This Period

10471.17

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**WRIGHT DIRECTION CONSULTING**Nature of Debt (Purpose):  
**FUNDRAISING CONSULTING**

Mailing Address PO BOX 902

City State Zip Code  
CHESTERFIELD WI 63006

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.4123

Amount Incurred This Period

5805.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5805.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

16276.17

2) **TOTALS** This Period (last page this line number only) .....

161133.45

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

161133.45