

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		60598.82
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	336722.67									
(c) Total Receipts (from Line 19)	399773.87	2731593.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	736496.54	2792192.76								
7. Total Disbursements (from Line 31)	662730.63	2718426.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	73765.91	73765.91								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	45000.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	85410.00	560164.18
(i) Itemized (use Schedule A)	94919.83	910766.22
(ii) Unitemized	180329.83	1470930.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	1000.00
(b) Political Party Committees	39950.00	148775.00
(c) Other Political Committees (such as PACs)	220279.83	1620705.40
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	168670.25	889312.62
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	4645.52	197125.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	6178.27	24449.94
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	6178.27	24449.94
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	399773.87	2731593.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	393595.60	2707144.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4155.02	33139.05
(ii) Non-Federal Share.....	23544.93	134303.15
(b) Other Federal Operating Expenditures.....	506729.20	1266876.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	534429.15	1434319.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	2855.88
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	69000.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	30000.00	30000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	245.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	245.00
29. Other Disbursements.....	0.00	12500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	98301.48	1169506.81
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	98301.48	1169506.81
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	662730.63	2718426.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	639185.70	2584123.70

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	220279.83	1620705.40
34. Total Contribution Refunds (from Line 28(d))	0.00	245.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	220279.83	1620460.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	510884.22	1300016.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	4645.52	197125.98
38. Net Operating Expenditures (subtract Line 37 from Line 36)	506238.70	1102890.03

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Dave Anderson Mailing Address N7593 Autumnwood Lane City State Zip Code Malone WI 53049 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6 Transaction ID: SA11A1.26485 Amount of Each Receipt this Period 100.00 Contribution
Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00		

B. Full Name (Last, First, Middle Initial) Alfred Anding Mailing Address 4921 Tonyawatha Trail City State Zip Code Monona WI 53716 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 Transaction ID: SA11A1.26486 Amount of Each Receipt this Period 100.00 Contribution
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Michael Ariens Mailing Address N7449 Round Lake Rd City State Zip Code Brillion WI 54110 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6 Transaction ID: SA11A1.26489 Amount of Each Receipt this Period 1000.00 Contribution
Name of Employer Ariens Company Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Mark Aschliman

Mailing Address 3970 N Oakland Ave

City State Zip Code
Shorewood WI 53211

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

Name of Employer Self Occupation Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2006

Transaction ID: SA11A1.26490

Amount of Each Receipt this Period
200.00

Contribution

B. Full Name (Last, First, Middle Initial)
Carolyn Ausloos

Mailing Address 429 Woodside Drive

City State Zip Code
Cedarburg WI 53012

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2006

Transaction ID: SA11A1.26492

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Kathleen Balisteri

Mailing Address 618 Stonegate Pass

City State Zip Code
Colgate WI 53017

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

Name of Employer Information requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2006

Transaction ID: SA11A1.26493

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 800.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Lisa Baratta		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6	
Mailing Address 19725 Davidson Rd		Transaction ID: SA11A1.26495	
City State Zip Code Brookfield WI 53045		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Cardiovascular Associates Cardiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. James Barrett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6	
Mailing Address N51 W35427 River Road		Transaction ID: SA11A1.26499	
City State Zip Code Oconomowoc WI 53066		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Information Requested Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. James Barry, III		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 1121 N Edison Street		Transaction ID: SA11A1.26500	
City State Zip Code Milwaukee WI 53202		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation James T. Barry Co., Inc Real Estate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. William Barry		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 15085 Bending Brae Ct		Transaction ID: SA11A1.26501	
City State Zip Code Brookfield WI 53005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Speed Systems, Inc Owner	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. William Bass		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 2846 Aleo Cot		Transaction ID: SA11A1.26502	
City State Zip Code Fitchburg WI 53711	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Land's End Executive	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ned Bechthold		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 6	
Mailing Address PO Box 781		Transaction ID: SA11A1.26505	
City State Zip Code Waukesha WI 53187	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Payne and Dolan Inc President	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Scott Beightol		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 310 E Birch Ave		Transaction ID: SA11A1.26506	
City State Zip Code Whitefish Bay WI 53217	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Crystal Berg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 1962 Robins Run Road		Transaction ID: SA11A1.26508	
City State Zip Code Hartford WI 53027	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Helen Best		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address W220 N8124 Town Line Road		Transaction ID: SA11A1.26509	
City State Zip Code Menomonee Falls WI 53051	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Thomas Bode

Mailing Address 5240 Wind Point Rd

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2006

Transaction ID: SA11A1.26511

Amount of Each Receipt this Period
300.00

Contribution

B. Full Name (Last, First, Middle Initial)
Terry Briscoe

Mailing Address 250 S Executive Dr. #301

City State Zip Code
Brookfield WI 53005

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

Name of Employer National Insurance Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2006

Transaction ID: SA11A1.26517

Amount of Each Receipt this Period
125.00

Contribution

C. Full Name (Last, First, Middle Initial)
Bill Broydrick

Mailing Address 221 Bamboo Rd

City State Zip Code
West Palm Beach FL 33404

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

Name of Employer Broydrick & Associates Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2006

Transaction ID: SA11A1.26520

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1425.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Lisa 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 Occupation
Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26523

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mary Buestrin

Mailing Address 13259 N Lakewood Dr #3W

City State Zip Code
Mequon WI 53097

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

Name of Employer Occupation
Coalition for Wi Exec. Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26524

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Thomas Buestrin

Mailing Address 13259 N Lakewood Dr #3w

City State Zip Code
Mequon WI 53097

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

Name of Employer Occupation
Buestrin, Allen & Assoc Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26525

Amount of Each Receipt this Period
500.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Ted Burbach

Mailing Address 3636 E Norport Dr

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.26526

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Kathryn Burke

Mailing Address 7710 N Merrie Lane

City State Zip Code
Fox Point WI 53217

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

Name of Employer Housewife Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.26527

Amount of Each Receipt this Period
1250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Joan Burrell

Mailing Address 3045 Lakota Pl

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.26529

Amount of Each Receipt this Period
50.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Brion Collins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address N7123 Mill Pond Way		Transaction ID: SA11A1.26533
City State Zip Code Hartland WI 53029	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Information requested Occupation Information requested	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Contribution	

Full Name (Last, First, Middle Initial) B. James Connelly		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 800 West Bradley Road		Transaction ID: SA11A1.26535
City State Zip Code Milwaukee WI 53217	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Foley & Lardner Occupation Attorney	Aggregate Year-to-Date 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Contribution	

Full Name (Last, First, Middle Initial) C. Gordon Connor		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 305		Transaction ID: SA11A1.26536
City State Zip Code Laona WI 54541	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Nicolet Hardwoods Occupation Lumberjack	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Contribution	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Peter Cooley

Mailing Address 10611 Gazebo Hill Pwky

City State Zip Code
Mequon WI 53092

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

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.26538

Amount of Each Receipt this Period
50.00

Contribution

B. Full Name (Last, First, Middle Initial)
Donald Daffinson

Mailing Address N20902 Daffinson Ln

City State Zip Code
Etrick WI 54627

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

Name of Employer Self Occupation Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.26541

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Walter Dauska

Mailing Address 378 Shady Drive

City State Zip Code
Oneida WI 54155

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

Name of Employer Green Bay Packaging Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.26544

Amount of Each Receipt this Period
300.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Richard Davidson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address S32W33873 County Rd G		Transaction ID: SA11A1.26546	
City Dousman State WI Zip Code 53118	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer N/A Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) B. Craig Dickman		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address 2914 Westline Road		Transaction ID: SA11A1.26551	
City Green Bay State WI Zip Code 54313-8264	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Paper Transport Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 1100.00			

Full Name (Last, First, Middle Initial) C. Wolfgang Dörner		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6	
Mailing Address PO Box 655		Transaction ID: SA11A1.26554	
City Hartland State WI Zip Code 53029	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Information requested Occupation Information requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
David Drumel

Mailing Address N82 W23548 Pitching Wedge Ct

City State Zip Code
Sussex WI 53089

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

Name of Employer Information requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2006

Transaction ID: SA11A1.26558

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Harold Eichstadt

Mailing Address 1820 Vinland Road

City State Zip Code
Oshkosh WI 54901

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2006

Transaction ID: SA11A1.26564

Amount of Each Receipt this Period
300.00

Contribution

C. Full Name (Last, First, Middle Initial)
Robert Eschweiler

Mailing Address 12600 N Port Washington Rd #121

City State Zip Code
Mequon WI 53092-3328

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2006

Transaction ID: SA11A1.26565

Amount of Each Receipt this Period
125.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	675.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. William Flader		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 17 Fuller Drive		Transaction ID: SA11A1.26572	
City State Zip Code Madison WI 53704	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) B. J. David Fuchs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 125 W Glenview Ct		Transaction ID: SA11A1.26579	
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Richard Galling		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 1911 E Bristlecone Dr		Transaction ID: SA11A1.26580	
City State Zip Code Hartland WI 53029	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Hammes Company of WI	Occupation HealthcareFc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Pamela Galloway

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 Information requested Occupation Information requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2006

Transaction ID: SA11A1.26582

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Candy Gialamas

Mailing Address 100 Thorstrand Rd

City State Zip Code
Madison WI 53705

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

Name of Employer Information requested Occupation Information requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: SA11A1.26587

Amount of Each Receipt this Period
10000.00

Contribution

C. Full Name (Last, First, Middle Initial)
George Gialamas

Mailing Address 100 Thorstrand Rd

City State Zip Code
Madison WI 53705

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

Name of Employer Information requested Occupation Information requested
Gialamas Co. Real estate development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2006

Transaction ID: SA11A1.26589

Amount of Each Receipt this Period
9000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	20000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Louise Googins

Mailing Address 3431 Nappe Drive

City Middleton State WI Zip Code 53562

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

Name of Employer Googins & Co. Occupation Fin Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.26595

Amount of Each Receipt this Period
 500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Scott Gray

Mailing Address 1080 Lawrence Ave

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.26600

Amount of Each Receipt this Period
 500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Alvin Greason

Mailing Address N8145 School Forrest Lane

City Crivitz State WI Zip Code 54114

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.26602

Amount of Each Receipt this Period
 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Jo Ann Greb

Mailing Address 8861 W Wilson Bay Dr

City State Zip Code
Hayward WI 54843

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

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26603

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Richard Green

Mailing Address 681 Lincoln Avenue

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.26604

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Jon Hammes

Mailing Address 7224 West Highland Road

City State Zip Code
Mequon WI 53092

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

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.26609

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **5750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 154
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Michael Hansen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6	
Mailing Address 2033 Ludington Ave		Transaction ID: SA11A1.26610	
City State Zip Code Wauwatosa WI 53226	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Wisconsin Coach Lines	Occupation CPA/Bus Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. William Hargarten		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 1525 Weber Ct		Transaction ID: SA11A1.26611	
City State Zip Code Hartland WI 53029	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer North American Clutch	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Joyce Heinrich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address 1035 Hill St #224		Transaction ID: SA11A1.26616	
City State Zip Code Watertown WI 53094	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information Requested	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Jeffery Held

Mailing Address 1811 E. Bristlecone Dr.

City State Zip Code
Hartland WI 53029

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

Name of Employer Occupation
General Fiberglass Supply Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.26617

Amount of Each Receipt this Period
200.00

Contribution

B. Full Name (Last, First, Middle Initial)
John Hillen

Mailing Address 9329 N Kelly Lake Rd

City State Zip Code
Suring WI 54174

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.26620

Amount of Each Receipt this Period
50.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ho-Chunk Nation

Mailing Address PO Box 640

City State Zip Code
Black River Falls WI 54615

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.26833

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Roger Hoffman

Mailing Address 1612 S Golf Glen Unit F

City Madison State WI Zip Code 53704

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

Name of Employer Self Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.26621

Amount of Each Receipt this Period
 500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Roger Hoffman

Mailing Address 1612 S Golf Glen Unit F

City Madison State WI Zip Code 53704

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

Name of Employer Self Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.26622

Amount of Each Receipt this Period
 125.00

Contribution

C. Full Name (Last, First, Middle Initial)
Cynthia Johnson

Mailing Address 2578 24th St

City Rice Lake State WI Zip Code 54868

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

Name of Employer information requested Occupation information requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26626

Amount of Each Receipt this Period
 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 875.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Tali Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 10559 Michigan Ave		Transaction ID: SA11A1.26627
City State Zip Code Hayward WI 54843	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Glenn Jonas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 1903 Granville Road		Transaction ID: SA11A1.26629
City State Zip Code Cedarburg WI 53012	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer RF Technologies Inc Occupation Consultant	Aggregate Year-to-Date ▼ 2750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lolita Kachel		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 6
Mailing Address 513 W. Center Street		Transaction ID: SA11A1.26630
City State Zip Code Whitewater WI 53190	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer DLK Enterprises, Inc. Occupation Property Manager	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. John Keen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4604 N Wilshire Rd		Transaction ID: SA11A1.26633
City State Zip Code Milwaukee WI 53211	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation information requested Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Nancy Keen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 4604 N Wilshire Rd		Transaction ID: SA11A1.26634
City State Zip Code Whitefish Bay WI 53211	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation information requested Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. James Keyes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 1522 N Prospect Avenue, Apt. 1802		Transaction ID: SA11A1.26635
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Johnson Controls Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chairman Aggregate Year-to-Date ▼ 3500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Kathy Kiernan Mailing Address 1751 Scenic Rd City Richfield State WI Zip Code 53076 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.26636 Amount of Each Receipt this Period 50.00 Contribution
Name of Employer Retired Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00		

B. Full Name (Last, First, Middle Initial) Stephen King Mailing Address P.O. Box 366 City Milton State WI Zip Code 53563 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 Transaction ID: SA11A1.26641 Amount of Each Receipt this Period 500.00 Contribution
Name of Employer Tomah Products Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) James Klauser Mailing Address W281 N3416 Taylors Woods Road City Pewaukee State WI Zip Code 53072 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 Transaction ID: SA11A1.26642 Amount of Each Receipt this Period 500.00 Contribution
Name of Employer Wisconsin Electric Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Brian Knox		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 421 Milwaukee Ave		Transaction ID: SA11A1.26647
City State Zip Code Fort Atkinson WI 53538	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer WD Hoard & Sons Co	Occupation Publisher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Randall Knox		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address N3551 Hwy N		Transaction ID: SA11A1.26648
City State Zip Code Jefferson WI 53549	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer W.D. Hoard & Sons, Co	Occupation VP - Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Dennis Korsmo		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 4720 Stratford Dr		Transaction ID: SA11A1.26649
City State Zip Code Greendale WI 53129	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	

SUBTOTAL of Receipts This Page (optional) ▶	2050.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. C. Kozarek		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address 723 Lake St.		Transaction ID: SA11A1.26650	
City State Zip Code Tomah WI 54660	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Don Koziol		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 70 Sinclair Ln		Transaction ID: SA11A1.26651	
City State Zip Code Wolfeboro NH 03894	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Information requested Occupation Information requested	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Edith Kraus		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 2701 Sunset Blvd #1		Transaction ID: SA11A1.26653	
City State Zip Code Stevens Point WI 54481	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Retired Occupation	Aggregate Year-to-Date ▼ 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Edith Kraus

Mailing Address 2701 Sunset Blvd #1

City State Zip Code
Stevens Point WI 54481

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

Name of Employer Retired Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: SA11A1.26654

Amount of Each Receipt this Period
125.00

Contribution

B. Full Name (Last, First, Middle Initial)
Louis Krikelas

Mailing Address 407 E Madison St, Apt 25

City State Zip Code
Dodgeville WI 53533

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2006

Transaction ID: SA11A1.26656

Amount of Each Receipt this Period
200.00

Contribution

C. Full Name (Last, First, Middle Initial)
Marvin Kuehner

Mailing Address 9802 County Road Y

City State Zip Code
Marshfield WI 54449

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

Name of Employer Marshfield Clinic Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2006

Transaction ID: SA11A1.26657

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	425.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
George Kummeth

Mailing Address 4324 Knuell Street

City State Zip Code
Manitowoc WI 54220

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

Name of Employer Occupation
Universal Wire & Stamping President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.26658

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Frank Ladky

Mailing Address 1711 East Fox Lane

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
Ladky & Assoc. Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.26661

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Glenn Langer

Mailing Address 1735 Wedgewood Dr W

City State Zip Code
Elm Grove WI 53122

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

Name of Employer Occupation
Langer Roofing Estimator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.26662

Amount of Each Receipt this Period
50.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Craig Leipold		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6	
Mailing Address 555 Main Street Ste 500		Transaction ID: SA11A1.26666	
City State Zip Code Racine WI 53403	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Nashville Predators	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Robert Leverenz		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 2826 Windepoint Court		Transaction ID: SA11A1.26669	
City State Zip Code Sheboygan WI 53083	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer RHL Consulting Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) C. Christopher Magiera		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6	
Mailing Address 1506 Pine View Ln		Transaction ID: SA11A1.26673	
City State Zip Code Wausau WI 54403	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer GI Associates SC	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00		

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Mike Menard

Mailing Address 40 Oak Creek Trail

City State Zip Code
Madison WI 53717

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

Name of Employer Occupation
Self Employed Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: SA11A1.26684

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
David Metzig

Mailing Address 7742 cty Rd 11

City State Zip Code
Fremont WI 54940

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

Name of Employer Occupation
Union Star Cheesemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 21 / 2006

Transaction ID: SA11A1.26685

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Timothy Michael

Mailing Address 4165 Rose Hill Avenue

City State Zip Code
Cincinnati OH 45229

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

Name of Employer Occupation
Michael Freres & Associates Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2006

Transaction ID: SA11A1.26688

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) J Miller Mailing Address 4933 Evergreen Drive City State Zip Code Sheboygan WI 53081 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6 Transaction ID: SA11A1.26689 Amount of Each Receipt this Period 100.00 Contribution
Name of Employer Miller Engineers & Scientists Occupation Civ. Engr. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00		

B. Full Name (Last, First, Middle Initial) Nancy Nason Mailing Address PO Box 13065 City State Zip Code Green Bay WI 54307 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 Transaction ID: SA11A1.26696 Amount of Each Receipt this Period 300.00 Contribution
Name of Employer Information requested Occupation Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Manfred Neumann Mailing Address S43W22570 Beeheim Rd City State Zip Code Waukesha WI 53189 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6 Transaction ID: SA11A1.26699 Amount of Each Receipt this Period 250.00 Contribution
Name of Employer Information requested Occupation Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Ann Nischke

Mailing Address 246 N. Racine Street

City State Zip Code
Waukesha WI 53186

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

Name of Employer State of Wisconsin Occupation
State Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26702

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ann Nischke

Mailing Address 246 N. Racine Street

City State Zip Code
Waukesha WI 53186

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

Name of Employer State of Wisconsin Occupation
State Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.26703

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Oneida Tribe of Indians

Mailing Address PO Box 365

City State Zip Code
Oneida WI 54155

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.26704

Amount of Each Receipt this Period
8000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	8350.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Cindy Ort

Mailing Address E8299 Collier Rd

City State Zip Code
New London WI 54961

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

Name of Employer Information requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.26705

Amount of Each Receipt this Period
960.00

Contribution

B. Full Name (Last, First, Middle Initial)
Dorothy Owen

Mailing Address 137 Canterbury Road

City State Zip Code
Eau Claire WI 54701

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

Name of Employer N/A Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3375.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.26707

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Greg Pauly

Mailing Address 1711 Circle Drive

City State Zip Code
New Holstein WI 53061

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

Name of Employer Retired Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.26710

Amount of Each Receipt this Period
550.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2010.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Daniel Peterson

Mailing Address 2821 N Polzin Rd

City State Zip Code
Janesville WI 53548

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.26711

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
William Raftery

Mailing Address 6724 Shamrock Glen Circle

City State Zip Code
Middleton WI 53562

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

Name of Employer State of WI Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.26714

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Robert Schaefer

Mailing Address 2323 N. Mayfair Road STE 490

City State Zip Code
Wauwatosa WI 53226

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

Name of Employer Retired Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26725

Amount of Each Receipt this Period
250.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Earl Schiefelbein

Mailing Address 1700 S. River Rd., Apt. 263

City State Zip Code
Janesville WI 53546

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2006

Transaction ID: SA11A1.26726

Amount of Each Receipt this Period
50.00

Contribution

B. Full Name (Last, First, Middle Initial)
David Schmidt

Mailing Address PO Box E

City State Zip Code
Wittenberg WI 54499

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

Name of Employer Occupation
Schmidt-Schulte, Inc Funeral Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2006

Transaction ID: SA11A1.26727

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Eric Schumann

Mailing Address 7312 Douglas Ave Box 396

City State Zip Code
Racine WI 53402

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

Name of Employer Occupation
Merit Gear Gear Maker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2006

Transaction ID: SA11A1.26730

Amount of Each Receipt this Period
100.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Eric Schumann

Mailing Address 7312 Douglas Ave Box 396

City State Zip Code
Racine WI 53402

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

Name of Employer Merit Gear Occupation Gear Maker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2006

Transaction ID: SA11A1.26731

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mae Seaman

Mailing Address 324 Center Ave Apt 3

City State Zip Code
Sheboygan WI 53081

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2006

Transaction ID: SA11A1.26734

Amount of Each Receipt this Period
50.00

Contribution

C. Full Name (Last, First, Middle Initial)
John Sensenbrenner

Mailing Address 909 East Forest Avenue

City State Zip Code
Neenah WI 54956

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

Name of Employer Retired Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2006

Transaction ID: SA11A1.26735

Amount of Each Receipt this Period
250.00

Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Trygve Solberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address PO Box 50		Transaction ID: SA11A1.26738	
City Minocqua	State WI	Amount of Each Receipt this Period 1250.00	
Zip Code 54548		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer TA Solberg Company, Inc	Occupation Grocer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Robert Spindell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 1626 North Prospect Avenue		Transaction ID: SA11A1.26739	
City Milwaukee	State WI	Amount of Each Receipt this Period 50.00	
Zip Code 53202		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) C. Stockbridge-Munsee Community		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address N8705 Mohheconnuck Road		Transaction ID: SA11A1.26741	
City Bowler	State WI	Amount of Each Receipt this Period 1000.00	
Zip Code 54416		Contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Bryce Styza

Mailing Address 6395 N Hwy 83

City State Zip Code
Hartland WI 53029

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

Name of Employer Occupation
Harmony Homes Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.26744

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Don Taylor

Mailing Address S23 W27100 Shanangi Lane

City State Zip Code
Waukesha WI 53188

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

Name of Employer Occupation
Waukesha State Bank Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2520.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.26745

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Stacy Terris

Mailing Address 705 West Bradley Road

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
Clayton Corp Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.26748

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. David Tolan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 2304 W Cumberland Ct		Transaction ID: SA11A1.26749
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. John Torgerson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address W2516 Silver Springs Dr		Transaction ID: SA11A1.26753
City State Zip Code Eau Claire WI 54701	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Preferred Mfg. Co. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CPA/Broker Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Frank Trecroci		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 8400 122nd St		Transaction ID: SA11A1.26754
City State Zip Code Pleasant Prairie WI 53158	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information requested Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Sarah Troupis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4126 Timber Lane		Transaction ID: SA11A1.26756
City State Zip Code Cross Plains WI 53528	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer DeWitt Ross & Stevens	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Sarah Troupis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4126 Timber Lane		Transaction ID: SA11A1.27780
City State Zip Code Cross Plains WI 53528	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C		Best Efforts Compliance [MEMO ITEM]
Name of Employer DeWitt Ross & Stevens	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. James Vaughan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 12600 N Port Washington Rd		Transaction ID: SA11A1.26767
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. James Villa		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address 1331 S 93rd St		Transaction ID: SA11A1.26772	
City Milwaukee State WI Zip Code 53214	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information requested Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Richard Wolding		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address PO Box 68		Transaction ID: SA11A1.26780	
City Nelsonville State WI Zip Code 54458	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Trucking Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Margaret Ziegler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 930 Schloemer Dr		Transaction ID: SA11A1.26785	
City West Bend State WI Zip Code 53095	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 45 / 154	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Gordon Zoerb

Mailing Address 1040 N 40th St

City State Zip Code
Manitowoc WI 54220

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
11 / 21 / 2006

Transaction ID: SA11A1.26786

Amount of Each Receipt this Period
150.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	85410.00

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

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

FOR LINE NUMBER: PAGE 46 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

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

Mailing Address 1504 Robin Hood Trail

City State Zip Code
Austin TX 78703

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 8 / 2 0 0 6

Transaction ID: SA11C.26793

Amount of Each Receipt this Period
3000.00

Contribution

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA

Mailing Address 600 PEACHTREE ST STE 1500
PO BOX 40789

City State Zip Code
ATLANTA GA 30308

FEC ID number of contributing federal political committee. **C** C00094656

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 0 / 2 0 0 6

Transaction ID: SA11C.26794

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
CENTURY TELEPHONE ENTERPRISES, INC FEDERAL POLITICAL ACTION COMMITTEE (CENTURY TEL)

Mailing Address 100 CenturyTel Drive

City State Zip Code
Monroe LA 71203

FEC ID number of contributing federal political committee. **C** C00225524

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 6

Transaction ID: SA11C.26796

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
35th Floor

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11C.26845

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
DAIMLERCHRYSLER CORPORATION POLITICAL SUPPORT COMMITTEE

Mailing Address 1000 CHRYSLER DRIVE
CIMS # 485-10-95

City AUBURN HILLS State MI Zip Code 48326

FEC ID number of contributing federal political committee. **C** C00043687

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11C.26838

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
GOLDEN RULE FINANCIAL CORPORATION - POLITICAL ACTION COMMITTEE

Mailing Address 7440 WOODLAND DRIVE

City INDIANAPOLIS State IN Zip Code 46278

FEC ID number of contributing federal political committee. **C** C00231407

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11C.26799

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. HUMANA INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1776 EYE STREET NW Suite 890		Transaction ID: SA11C.26800
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00271007		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. JOHNSON & JOHNSON EMPLOYEES' GOOD GOVERNMENT FUND		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address One Johnson & Johnson Plaza		Transaction ID: SA11C.26806
City State Zip Code New Brunswick NJ 08933	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00010983		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 6
Mailing Address 655 15th Street NW Suite 445		Transaction ID: SA11C.26809
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00236489		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)		Date of Receipt MM / DD / YYYY 10 / 23 / 2006
Mailing Address P. O. Box 7135		Transaction ID: SA11C.26847
City Washington State DC Zip Code 20044	FEC ID number of contributing federal political committee. C C00283135	Amount of Each Receipt this Period 500.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 500.00	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 10 / 19 / 2006
Mailing Address 720 E. Wisconsin Ave.		Transaction ID: SA11C.26810
City Milwaukee State WI Zip Code 53202	FEC ID number of contributing federal political committee. C C00197095	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PAPPAS TELECASTING COMPANIES PAC		Date of Receipt MM / DD / YYYY 11 / 03 / 2006
Mailing Address 500 S. Chinowth Road TENTH FLOOR		Transaction ID: SA11C.26811
City Visalia State CA Zip Code 93277	FEC ID number of contributing federal political committee. C C00383018	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 50 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
SPRINT NEXTEL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 401 9TH ST #400
KSOPHN0212-2A454

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Transaction ID: SA11C.26843

Amount of Each Receipt this Period
450.00

Contribution

B. Full Name (Last, First, Middle Initial)
TDS Telecom PAC

Mailing Address PO Box 5158

City Madison State WI Zip Code 53705

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 6

Transaction ID: SA11C.26815

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
THE COMMONWEALTH PAC

Mailing Address 45 School Street 2nd Fl

City Boston State MA Zip Code 02108

FEC ID number of contributing federal political committee. **C** C00403022

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: SA11C.26816

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **6450.00**

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

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

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

FOR LINE NUMBER: PAGE 51 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. TIME WARNER TELECOM INC. POLITICAL ACTION COMMITTEE

Mailing Address 10475 PARK MEADOWS DRIVE

City State Zip Code
LITTLETON CO 80124

FEC ID number of contributing federal political committee. **C** C00355941

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: SA11C.26818

Amount of Each Receipt this Period
500.00

Contribution

Full Name (Last, First, Middle Initial)
B. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 Bren Road East
9900 BREN ROAD EAST

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 6

Transaction ID: SA11C.26819

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
C. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8th Street

City State Zip Code
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 6

Transaction ID: SA11C.26821

Amount of Each Receipt this Period
3000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. WISCONSIN BANKERS ASSOCIATION (WISBANKPAC)

Mailing Address P.O. Box 8880 4721 S. Biltmore Ln
4721 S BILTMORE LN

City State Zip Code
Madison WI 53708

FEC ID number of contributing federal political committee. **C** C00048181

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 6

Transaction ID: SA11C.26823

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	39950.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) CITIZENS FOR TOM PETRI		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address P.O. Box 270		Transaction ID: SA12.26798	
City Fond du Lac	State WI	Zip Code 54936	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C C00107003		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 62700.00		

B. Full Name (Last, First, Middle Initial) FRIENDS OF NICK REID		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address PO BOX 446		Transaction ID: SA12.26842	
City SUPERIOR	State WI	Zip Code 54880	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C C00416099		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

C. Full Name (Last, First, Middle Initial) FRIENDS OF NICK REID		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	
Mailing Address PO BOX 446		Transaction ID: SA12.26836	
City SUPERIOR	State WI	Zip Code 54880	Amount of Each Receipt this Period 1270.25
FEC ID number of contributing federal political committee. C C00416099		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3270.25		

SUBTOTAL of Receipts This Page (optional) ▶	5970.25
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: PAGE 54 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
GINGREY FOR CONGRESS

Mailing Address PO Box U

City State Zip Code
Marietta GA 30060

FEC ID number of contributing federal political committee. **C** C00370783

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: SA12.26840

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
JOHN SHADEGGS FRIENDS

Mailing Address PO BOX 45444

City State Zip Code
Phoenix AZ 85064

FEC ID number of contributing federal political committee. **C** C00280453

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: SA12.26805

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
366700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	6

Transaction ID: SA12.26824

Amount of Each Receipt this Period
107900.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **110900.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 1st Street SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
393100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: SA12.26825

Amount of Each Receipt this Period
26400.00

Contribution

B. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS

Mailing Address P. O. Box 1919
P. O. Box 1919

City Janesville State WI Zip Code 53547

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 6

Transaction ID: SA12.26790

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS

Mailing Address P. O. Box 1919
P. O. Box 1919

City Janesville State WI Zip Code 53547

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62900.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 6

Transaction ID: SA12.26791

Amount of Each Receipt this Period
2700.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	34100.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 56 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS

Mailing Address P. O. Box 1919
P. O. Box 1919

City State Zip Code
Janesville WI 53547

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
67900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 6

Transaction ID: SA12.26792

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
SENSENBRENNER COMMITTEE

Mailing Address PO BOX 575

City State Zip Code
BROOKFIELD WI 53008

FEC ID number of contributing federal political committee. **C** C00083428

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 6

Transaction ID: SA12.26813

Amount of Each Receipt this Period
10000.00

Contribution

C. Full Name (Last, First, Middle Initial)
SENSENBRENNER COMMITTEE

Mailing Address PO BOX 575

City State Zip Code
BROOKFIELD WI 53008

FEC ID number of contributing federal political committee. **C** C00083428

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 6

Transaction ID: SA12.26814

Amount of Each Receipt this Period
2700.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 17700.00

TOTAL This Period (last page this line number only) ► 168670.25

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

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

FOR LINE NUMBER: PAGE 57 / 154
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Andrew Davis

Mailing Address 827 Michigan Ave

City State Zip Code
South Milwaukee WI 53172

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.39

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 6

Transaction ID: SA15.26548

Amount of Each Receipt this Period
258.39

Reimbursement for overpmt of expenses

B. Full Name (Last, First, Middle Initial)
ETSI Data Management Capabilities Ltd.

Mailing Address 6601 Blanco Rd, Ste. 120

City State Zip Code
San Antonio TX 78216

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 6

Transaction ID: SA15.26834

Amount of Each Receipt this Period
2000.00

Reimbursement for overpayment

C. Full Name (Last, First, Middle Initial)
Jessica Irving

Mailing Address 6100 Washington Ave, Ste E2

City State Zip Code
Racine WI 53406

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.95

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 6

Transaction ID: SA15.26625

Amount of Each Receipt this Period
265.95

Reimbursement for overpmt of expenses

SUBTOTAL of Receipts This Page (optional) ► **2524.34**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. James T Michel		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 2419 N 9th St		Transaction ID: SA15.26687	
City Sheboygan	State WI	Zip Code 53083	Amount of Each Receipt this Period 282.13
FEC ID number of contributing federal political committee. C		Reimbursement for overpmt of expenses	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 532.13		

Full Name (Last, First, Middle Initial) B. Christopher Reader		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 321 W Main St #202		Transaction ID: SA15.26718	
City Madison	State WI	Zip Code 53186	Amount of Each Receipt this Period 788.86
FEC ID number of contributing federal political committee. C		Reimbursement for overpmt of expenses	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 788.86		

Full Name (Last, First, Middle Initial) C. Sarah Ulrich		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 915 Maruknoll Cir		Transaction ID: SA15.26763	
City Glen Ellyn	State WI	Zip Code 60137	Amount of Each Receipt this Period 305.53
FEC ID number of contributing federal political committee. C		Reimbursement for COBRA	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1222.12		

SUBTOTAL of Receipts This Page (optional) ▶	1376.52
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Marci Van Adestine

Mailing Address 2387 Town Hall Rd

City State Zip Code
Green Bay WI 54311

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	6

Transaction ID: SA15.26766

Amount of Each Receipt this Period
370.93

Reimbursement for overpmt of expenses

B. Full Name (Last, First, Middle Initial)
Jason Vick

Mailing Address 1810 Fordem Ave #25

City State Zip Code
Madison WI 53704

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	6

Transaction ID: SA15.26771

Amount of Each Receipt this Period
238.73

Reimbursement for overpmt of expenses

SUBTOTAL of Receipts This Page (optional)	▶	609.66
TOTAL This Period (last page this line number only)	▶	4510.52

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 60 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Advantage		Transaction ID: SB21B.26454 Date of Disbursement																					
Mailing Address 1611 N. Kent Street, STE 905		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	0	/	2	0	0	6														
City Arlington	State VA	Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement Automated phone calls - not FEA		Category/ Type	13413.62																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. American Express Merchant Services		Transaction ID: SB21B.26447 Date of Disbursement																					
Mailing Address PO Box 53852		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	3	1	/	2	0	0	6														
City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit card processing fees		Category/ Type	359.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. American Express Merchant Services		Transaction ID: SB21B.26448 Date of Disbursement																					
Mailing Address PO Box 53852		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	3	1	/	2	0	0	6														
City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit card processing fees		Category/ Type	73.14																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	13845.76
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Applebees		Transaction ID: SB21B.26927 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 4551 W. 107th Street		Amount of Each Disbursement this Period 34.52
City Overland Park State KS Zip Code 66207	[MEMO ITEM]	
Purpose of Disbursement Staff meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Arena Communication		Transaction ID: SB21B.26419 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 515 South 700 East Suite 2C		Amount of Each Disbursement this Period 12002.50
City Salt Lake City State UT Zip Code 84102	[MEMO ITEM]	
Purpose of Disbursement Voter contact mail - not FEA Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Arena Communication		Transaction ID: SB21B.26459 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 515 South 700 East Suite 2C		Amount of Each Disbursement this Period 69314.92
City Salt Lake City State UT Zip Code 84102	[MEMO ITEM]	
Purpose of Disbursement Voter contact mail - not FEA Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	81317.42
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

PAGE 62 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Best Buy		Transaction ID: SB21B.26919 Date of Disbursement 09 / 15 / 2006	
Mailing Address 2452 E Springs Dr		Amount of Each Disbursement this Period 84.90	
City Madison	State WI	Zip Code 53704	[MEMO ITEM]
Purpose of Disbursement Office supplies		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Best Buy		Transaction ID: SB21B.26916 Date of Disbursement 09 / 21 / 2006	
Mailing Address 2452 E Springs Dr		Amount of Each Disbursement this Period 69.61	
City Madison	State WI	Zip Code 53704	[MEMO ITEM]
Purpose of Disbursement Office supplies		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Best Buy		Transaction ID: SB21B.26920 Date of Disbursement 09 / 30 / 2006	
Mailing Address 2452 E Springs Dr		Amount of Each Disbursement this Period 15.00	
City Madison	State WI	Zip Code 53704	[MEMO ITEM]
Purpose of Disbursement Office supplies		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Kevin Binversie		Transaction ID: SB21B.26420 Date of Disbursement 10 / 28 / 2006	
Mailing Address 919 N 5th Street		Amount of Each Disbursement this Period 306.00	
City Sheboygan State WI Zip Code 53081	Purpose of Disbursement Expense reimbursement for food	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Brocach Irish Pub		Transaction ID: SB21B.26903 Date of Disbursement 09 / 15 / 2006	
Mailing Address 7 W Main St		Amount of Each Disbursement this Period 20.33	
City Madison State WI Zip Code 53703	Purpose of Disbursement Staff meal	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Casey Buboltz		Transaction ID: SB21B.26422 Date of Disbursement 10 / 28 / 2006	
Mailing Address 1714 Sunnysude Lane		Amount of Each Disbursement this Period 300.00	
City De Pere State WI Zip Code 54115	Purpose of Disbursement Expense reimbursement for food	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	606.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Burger King		Transaction ID: SB21B.26917 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 6
Mailing Address 2411 Center Dr		Amount of Each Disbursement this Period 6.04
City Hudson State WI Zip Code 54016	[MEMO ITEM]	
Purpose of Disbursement Staff meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. CLS Services Inc.		Transaction ID: SB21B.26869 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address N172 South Park Drive		Amount of Each Disbursement this Period 12149.55
City Appleton State WI Zip Code 54914-8404	[MEMO ITEM]	
Purpose of Disbursement Field signs Candidate Name GARD FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. CLS Services Inc.		Transaction ID: SB21B.26857 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address N172 South Park Drive		Amount of Each Disbursement this Period 2688.00
City Appleton State WI Zip Code 54914-8404	[MEMO ITEM]	
Purpose of Disbursement Field signs Candidate Name GARD FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	14837.55
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Comfort Inn - Rhinelander		Transaction ID: SB21B.26965 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1490 Lincoln St		Amount of Each Disbursement this Period 305.00	
City Rhinelander State WI Zip Code 54501	Purpose of Disbursement Room Rental - not FEA	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Comfort Inn - Rhinelander		Transaction ID: SB21B.26972 Date of Disbursement 11 / 07 / 2006	
Mailing Address 1490 Lincoln St		Amount of Each Disbursement this Period 348.60	
City Rhinelander State WI Zip Code 54501	Purpose of Disbursement Room Rental - not FEA	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Comfort Suites		Transaction ID: SB21B.26989 Date of Disbursement 11 / 08 / 2006	
Mailing Address 1951 Bond Street		Amount of Each Disbursement this Period 82.80	
City Green Bay State WI Zip Code 54303	Purpose of Disbursement Room Rental - not FEA	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

[MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Comfort Suites		Transaction ID: SB21B.26991 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 1951 Bond Street		Amount of Each Disbursement this Period 82.80
City Green Bay State WI Zip Code 54303	Category/Type	
Purpose of Disbursement Room Rental - not FEA Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Comfort Suites		Transaction ID: SB21B.26992 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 1951 Bond Street		Amount of Each Disbursement this Period 82.80
City Green Bay State WI Zip Code 54303	Category/Type	
Purpose of Disbursement Room Rental - not FEA Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Comfort Suites		Transaction ID: SB21B.26993 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 1951 Bond Street		Amount of Each Disbursement this Period 96.55
City Green Bay State WI Zip Code 54303	Category/Type	
Purpose of Disbursement Room Rental - not FEA Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Comfort Suites		Transaction ID: SB21B.26865 Date of Disbursement 11 / 21 / 2006	
Mailing Address 1951 Bond Street		Amount of Each Disbursement this Period 3097.65	
City Green Bay State WI Zip Code 54303	Purpose of Disbursement Hotel rooms - not FEA	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Comfort Suites - Waupaca		Transaction ID: SB21B.26967 Date of Disbursement 11 / 07 / 2006	
Mailing Address 199 Firefox Dr		Amount of Each Disbursement this Period 334.40	
City Waupaca State WI Zip Code 54981	Purpose of Disbursement Room Rental - not FEA	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Comfort Suites - Waupaca		Transaction ID: SB21B.26969 Date of Disbursement 11 / 07 / 2006	
Mailing Address 199 Firefox Dr		Amount of Each Disbursement this Period 334.40	
City Waupaca State WI Zip Code 54981	Purpose of Disbursement Room Rental - not FEA	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	3097.65
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 68 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Comfort Suites - Waupaca		Transaction ID: SB21B.26970 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 199 Firefox Dr		Amount of Each Disbursement this Period 334.40	
City Waupaca	State WI	Zip Code 54981	[MEMO ITEM]
Purpose of Disbursement Room Rental - not FEA		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Comfort Suites - Waupaca		Transaction ID: SB21B.26971 Date of Disbursement MM / DD / YYYY 11 / 07 / 2006	
Mailing Address 199 Firefox Dr		Amount of Each Disbursement this Period 334.40	
City Waupaca	State WI	Zip Code 54981	[MEMO ITEM]
Purpose of Disbursement Room Rental - not FEA		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Conquest Communications Group		Transaction ID: SB21B.26455 Date of Disbursement MM / DD / YYYY 11 / 10 / 2006	
Mailing Address 2812 Emerywood Pky Ste 103		Amount of Each Disbursement this Period 1765.00	
City Richmond	State VA	Zip Code 23294-3718	[MEMO ITEM]
Purpose of Disbursement Polling		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1765.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Crowne Plaza Hotel		Transaction ID: SB21B.26913 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 4402 East Washington Ave		Amount of Each Disbursement this Period 1959.53
City Madison State WI Zip Code 53701	[MEMO ITEM]	
Purpose of Disbursement Hotel rooms - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cub Foods		Transaction ID: SB21B.26907 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 4141 Nakoosa Tr		Amount of Each Disbursement this Period 74.60
City Madison State WI Zip Code 53714	[MEMO ITEM]	
Purpose of Disbursement Staff refreshments		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Davians Banquet & Conference Center		Transaction ID: SB21B.26416 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 16300 W Silver Spring Dr		Amount of Each Disbursement this Period 3750.12
City Menomonee Falls State WI Zip Code 53051	[MEMO ITEM]	
Purpose of Disbursement Event refreshments - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3750.12
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Andrew Davis		Transaction ID: SB21B.26425 Date of Disbursement 10 / 28 / 2006	
Mailing Address 827 Michigan Ave		Amount of Each Disbursement this Period 1500.00	
City South Milwaukee State WI Zip Code 53172	Purpose of Disbursement Expense reimbursement for food	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dell Account		Transaction ID: SB21B.26924 Date of Disbursement 10 / 05 / 2006	
Mailing Address PO Box 9020		Amount of Each Disbursement this Period 83.82	
City Des Moines State IA Zip Code 50368	Purpose of Disbursement Power cords	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Edwardo's		Transaction ID: SB21B.26932 Date of Disbursement 10 / 14 / 2006	
Mailing Address 10845 W Bluemound Rd		Amount of Each Disbursement this Period 46.24	
City Milwaukee State WI Zip Code 53226	Purpose of Disbursement Staff meals	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car		Transaction ID: SB21B.26414 Date of Disbursement 10 / 27 / 2006
Mailing Address 1860 E. Washington Ave		Amount of Each Disbursement this Period 160.63
City Madison State WI Zip Code 53704	Category/ Type	
Purpose of Disbursement Van rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car		Transaction ID: SB21B.26415 Date of Disbursement 10 / 27 / 2006
Mailing Address 1860 E. Washington Ave		Amount of Each Disbursement this Period 190.46
City Madison State WI Zip Code 53704	Category/ Type	
Purpose of Disbursement Van rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car - Appleton		Transaction ID: SB21B.26973 Date of Disbursement 11 / 08 / 2006
Mailing Address 2600 W College Ave		Amount of Each Disbursement this Period 364.27 [MEMO ITEM]
City Appleton State WI Zip Code 54914	Category/ Type	
Purpose of Disbursement Van rental - not FEA		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	351.09
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car - Appleton		Transaction ID: SB21B.26975 Date of Disbursement																					
Mailing Address 2600 W College Ave		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>6</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	8		2	0	6															
City Appleton	State WI	Zip Code 54914	Amount of Each Disbursement this Period																				
Purpose of Disbursement Van rental - not FEA		Category/ Type	364.27																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: District:																							

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26976 Date of Disbursement																					
Mailing Address 2260 Main St		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>6</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	8		2	0	6															
City Green Bay	State WI	Zip Code 54311	Amount of Each Disbursement this Period																				
Purpose of Disbursement Van rental - not FEA		Category/ Type	391.92																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: District:																							

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26978 Date of Disbursement																					
Mailing Address 2260 Main St		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>6</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	8		2	0	6															
City Green Bay	State WI	Zip Code 54311	Amount of Each Disbursement this Period																				
Purpose of Disbursement Van rental - not FEA		Category/ Type	402.74																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26979 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 402.74
City Green Bay State WI Zip Code 54311		
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26980 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 433.04
City Green Bay State WI Zip Code 54311		
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26981 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 483.09
City Green Bay State WI Zip Code 54311		
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 74 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26982 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 1911.91
City Green Bay State WI Zip Code 54311		
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.27005 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 384.47
City Green Bay State WI Zip Code 54311		
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.27006 Date of Disbursement MM / DD / YYYY 11 / 08 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 384.47
City Green Bay State WI Zip Code 54311		
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26998 Date of Disbursement MM / DD / YYYY 11 / 09 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 244.36
City Green Bay	State WI Zip Code 54311	
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car - Green Bay		Transaction ID: SB21B.26999 Date of Disbursement MM / DD / YYYY 11 / 09 / 2006
Mailing Address 2260 Main St		Amount of Each Disbursement this Period 244.36
City Green Bay	State WI Zip Code 54311	
Purpose of Disbursement Van rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ethostream		Transaction ID: SB21B.26930 Date of Disbursement MM / DD / YYYY 10 / 15 / 2006
Mailing Address Wyndham Milwaukee		Amount of Each Disbursement this Period 9.95
City Milwaukee	State WI Zip Code	
Purpose of Disbursement Internet connection		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. ETSI Data Management Capabilities Ltd.		Transaction ID: SB21B.26855
Mailing Address 6601 Blanco Rd, Ste. 120		Date of Disbursement MM / DD / YYYY 11 / 04 / 2006
City San Antonio	State TX	Zip Code 78216
Purpose of Disbursement Generic automated calls	Amount of Each Disbursement this Period 12772.08	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Expedia		Transaction ID: SB21B.26926
Mailing Address 3150 139th Avenue SE		Date of Disbursement MM / DD / YYYY 10 / 07 / 2006
City Bellvue	State WA	Zip Code 98005
Purpose of Disbursement Travel service fee	Amount of Each Disbursement this Period 5.00	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Extended Stay America Appleton		Transaction ID: SB21B.26940
Mailing Address 4141 Boardwalk Ct		Date of Disbursement MM / DD / YYYY 10 / 23 / 2006
City Appleton	State WI	Zip Code 54914
Purpose of Disbursement Room rental - not FEA	Amount of Each Disbursement this Period 310.73	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

12772.08

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Extended Stay America Appleton		Transaction ID: SB21B.26941 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 310.73
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Extended Stay America Appleton		Transaction ID: SB21B.26942 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 310.73
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Extended Stay America Appleton		Transaction ID: SB21B.26948 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 177.56
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Extended Stay America Appleton		Transaction ID: SB21B.26946 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 177.56
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Extended Stay America Appleton		Transaction ID: SB21B.26953 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 88.78
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Extended Stay America Appleton		Transaction ID: SB21B.26954 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 360.70
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Extended Stay America Appleton		Transaction ID: SB21B.26955	
Mailing Address 4141 Boardwalk Ct		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Appleton	State WI	Zip Code 54914	Amount of Each Disbursement this Period 360.70
Purpose of Disbursement Room rental - not FEA		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Extended Stay America Appleton		Transaction ID: SB21B.26956	
Mailing Address 4141 Boardwalk Ct		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Appleton	State WI	Zip Code 54914	Amount of Each Disbursement this Period 360.70
Purpose of Disbursement Room rental - not FEA		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Extended Stay America Appleton		Transaction ID: SB21B.26957	
Mailing Address 4141 Boardwalk Ct		Date of Disbursement MM / DD / YYYY 11 / 03 / 2006	
City Appleton	State WI	Zip Code 54914	Amount of Each Disbursement this Period 360.70
Purpose of Disbursement Room rental - not FEA		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 80 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Extended Stay America Appleton		Transaction ID: SB21B.26958 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 360.70
City Appleton	State WI Zip Code 54914	
Purpose of Disbursement Room rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Extended Stay America Appleton		Transaction ID: SB21B.26959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 360.70
City Appleton	State WI Zip Code 54914	
Purpose of Disbursement Room rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Extended Stay America Appleton		Transaction ID: SB21B.26960 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 360.70
City Appleton	State WI Zip Code 54914	
Purpose of Disbursement Room rental - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Extended Stay America Appleton		Transaction ID: SB21B.26963 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 360.70
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Extended Stay America Appleton		Transaction ID: SB21B.26964 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 4141 Boardwalk Ct		Amount of Each Disbursement this Period 360.70
City Appleton State WI Zip Code 54914	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Famous Daves of Madison		Transaction ID: SB21B.26962 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 900 South Park Street		Amount of Each Disbursement this Period 108.95
City Madison State WI Zip Code 53715	[MEMO ITEM]	
Purpose of Disbursement Staff meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. FLS-DCI		Transaction ID: SB21B.26862 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 2401 W Behrend Drive STE 7		Amount of Each Disbursement this Period 4133.12
City Phoenix State AZ Zip Code 85027	Purpose of Disbursement Mapbooks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. FLS-DCI		Transaction ID: SB21B.26452 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 2401 W Behrend Drive STE 7		Amount of Each Disbursement this Period 12061.97
City Phoenix State AZ Zip Code 85027	Purpose of Disbursement GOTV phone calls - not FEA Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Francois Oil Company		Transaction ID: SB21B.27768 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 4601 Cottage Grove Rd		Amount of Each Disbursement this Period 2650.00
City Madison State WI Zip Code 53704	Purpose of Disbursement gas cards Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	16195.09
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Francois Oil Company		Transaction ID: SB21B.27766 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 4601 Cottage Grove Rd		Amount of Each Disbursement this Period 450.00	
City Madison State WI Zip Code 53704	Purpose of Disbursement Gas cards	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Gateway Ventures		Transaction ID: SB21B.26458 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
Mailing Address P.O. Box 1998		Amount of Each Disbursement this Period 3800.00	
City Madison State WI Zip Code 53704	Purpose of Disbursement Fundraising consulting - not FEA	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Glass Nickel Pizza		Transaction ID: SB21B.26905 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address 5003 University Ave		Amount of Each Disbursement this Period 35.86	
City Madison State WI Zip Code 53703	Purpose of Disbursement Staff meal	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	3800.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Glass Nickel Pizza		Transaction ID: SB21B.26906	
Mailing Address 5003 University Ave		Date of Disbursement 09 / 15 / 2006	
City Madison	State WI	Zip Code 53703	Amount of Each Disbursement this Period 69.08
Purpose of Disbursement staff meals		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) B. Glass Nickel Pizza		Transaction ID: SB21B.26936	
Mailing Address 5003 University Ave		Date of Disbursement 10 / 20 / 2006	
City Madison	State WI	Zip Code 53703	Amount of Each Disbursement this Period 79.37
Purpose of Disbursement Staff meal		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) C. Great Dane Brewery		Transaction ID: SB21B.26922	
Mailing Address 123 E Doty St		Date of Disbursement 10 / 04 / 2006	
City Madison	State WI	Zip Code 53703	Amount of Each Disbursement this Period 23.50
Purpose of Disbursement Staff meals		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Holiday Inn Express - Delafield		Transaction ID: SB21B.26928 Date of Disbursement 10 / 13 / 2006
Mailing Address 3030 Golf Rd		Amount of Each Disbursement this Period 87.09
City Delafield	State WI Zip Code 53018	
Purpose of Disbursement Hotel room - not FEA		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jon Horne		Transaction ID: SB21B.26426 Date of Disbursement 10 / 28 / 2006
Mailing Address 10101 Market St, D-50		Amount of Each Disbursement this Period 774.00
City Mosinee	State WI Zip Code 54455	
Purpose of Disbursement Expense reimbursement for food		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Interpark		Transaction ID: SB21B.26949 Date of Disbursement 11 / 01 / 2006
Mailing Address 819 N Water St		Amount of Each Disbursement this Period 12.00
City Milwaukee	State WI Zip Code 53202	
Purpose of Disbursement Parking		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	774.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Intrepid Media		Transaction ID: SB21B.26852 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 210 Mill Branch Road		Amount of Each Disbursement this Period 16000.00
City Tallahassee State FL Zip Code 32312	Purpose of Disbursement Political consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Jessica Irving		Transaction ID: SB21B.26428 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 6100 Washington Ave, Ste E2		Amount of Each Disbursement this Period 448.00
City Racine State WI Zip Code 53406	Purpose of Disbursement Expense reimbursement for food Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. JM Consulting LLC		Transaction ID: SB21B.26412 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 10500 N Port Washington Road Suite 203		Amount of Each Disbursement this Period 500.00
City Port Washington State WI Zip Code 53092	Purpose of Disbursement Political consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	16948.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Kramer Printing		Transaction ID: SB21B.26856 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 5515 Catfish Court		Amount of Each Disbursement this Period 5260.23
City Waunakee State WI Zip Code 53597	Purpose of Disbursement Printing - not FEA	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LexisNexis		Transaction ID: SB21B.26369 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address PO BOX 2314		Amount of Each Disbursement this Period 200.00
City Carol Stream State IL Zip Code 60132-2314	Purpose of Disbursement Subscription	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amy Lunde		Transaction ID: SB21B.26430 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 1726 E. Racine Ave		Amount of Each Disbursement this Period 550.00
City Waukesha State WI Zip Code 53186	Purpose of Disbursement Expense reimbursement for food	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6010.23
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 89 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. M&I Bank Credit Card Processing Center		Transaction ID: SB21B.26482
Mailing Address PO Box 3052		Date of Disbursement 11 / 02 / 2006
City Milwaukee	State WI	Zip Code 53201
Purpose of Disbursement Credit card charges	Amount of Each Disbursement this Period 297.12	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. M&I Bank Credit Card Processing Center		Transaction ID: SB21B.26483
Mailing Address PO Box 3052		Date of Disbursement 11 / 02 / 2006
City Milwaukee	State WI	Zip Code 53201
Purpose of Disbursement Credit card charges	Amount of Each Disbursement this Period 7000.00	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. M&I Bank Credit Card Processing Center		Transaction ID: SB21B.26484
Mailing Address PO Box 3052		Date of Disbursement 11 / 21 / 2006
City Milwaukee	State WI	Zip Code 53201
Purpose of Disbursement Credit card charges	Amount of Each Disbursement this Period 13999.07	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	21296.19
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.26449 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 4.50
City Madison State WI Zip Code 53705	Purpose of Disbursement Credit card processing fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.26370 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 463.23
City Madison State WI Zip Code 53705	Purpose of Disbursement Interest on line of credit Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. M&I Bank of Southern Wisconsin		Transaction ID: SB21B.26480 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 30.00
City Madison State WI Zip Code 53705	Purpose of Disbursement Bank fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	497.73
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Maelstrom Solutions Corporation		Transaction ID: SB21B.26371 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 250 N. Sunny Slope STE 300		Amount of Each Disbursement this Period 95.00
City Brookfield State WI Zip Code 53005	Purpose of Disbursement Web hosting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Matt Wylie Consulting		Transaction ID: SB21B.26457 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 551 Boylston Street, Ste 203		Amount of Each Disbursement this Period 11475.96
City Boston State MA Zip Code 02116	Purpose of Disbursement Political consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. James T Michel		Transaction ID: SB21B.26431 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 2419 N 9th St		Amount of Each Disbursement this Period 395.00
City Sheboygan State WI Zip Code 53083	Purpose of Disbursement Expense reimbursement for food Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	11965.96
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

PAGE 92 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Midwest Express		Transaction ID: SB21B.26925 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 6744 South Howell Avenue		Amount of Each Disbursement this Period 207.10
City Oak Creek State WI Zip Code 53154	[MEMO ITEM]	
Purpose of Disbursement Airfare - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Milwaukee Athletic Club		Transaction ID: SB21B.26851 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 411 E Wisconsin Ave Ste 600		Amount of Each Disbursement this Period 338.74
City Milwaukee State WI Zip Code 53202	Category/ Type	
Purpose of Disbursement Room rental and refreshments - not FEA		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Milwaukee Athletic Club		Transaction ID: SB21B.26859 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 411 E Wisconsin Ave Ste 600		Amount of Each Disbursement this Period 1747.53
City Milwaukee State WI Zip Code 53202	Category/ Type	
Purpose of Disbursement Event room rental - not FEA		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2086.27
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Milwaukee Marriot West		Transaction ID: SB21B.26860 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address W231 N1600 Corporate Court		Amount of Each Disbursement this Period 4326.05
City Waukesha State WI Zip Code 53186	Purpose of Disbursement Event room rental - not FEA Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: SB21B.26921 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO Box 9027		Amount of Each Disbursement this Period 40.70
City Des Moines State IA Zip Code 50368	Purpose of Disbursement Office supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Papa Johns		Transaction ID: SB21B.26900 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 2604 E Washington Ave		Amount of Each Disbursement this Period 27.07
City Madison State WI Zip Code 53704	Purpose of Disbursement Staff lunches Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	4326.05
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Paypal, Inc.		Transaction ID: SB21B.26897																					
Mailing Address #774100, 4100 Solutions Center		Date of Disbursement																					
City Chicago State IL Zip Code 60677-4001		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	2		2	0	0	6														
Purpose of Disbursement credit card processing fees		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">19.95</td> </tr> </table>		19.95																			
19.95																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Paypal, Inc.		Transaction ID: SB21B.26901																					
Mailing Address #774100, 4100 Solutions Center		Date of Disbursement																					
City Chicago State IL Zip Code 60677-4001		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	4		2	0	0	6														
Purpose of Disbursement credit card processing fees		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">19.95</td> </tr> </table>		19.95																			
19.95																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Paypal, Inc.		Transaction ID: SB21B.26934																					
Mailing Address #774100, 4100 Solutions Center		Date of Disbursement																					
City Chicago State IL Zip Code 60677-4001		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	8		2	0	0	6														
Purpose of Disbursement credit card processing fees		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">19.95</td> </tr> </table>		19.95																			
19.95																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"> <tr> <td> </td> </tr> </table>	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Persuasion Partners Inc.		Transaction ID: SB21B.26411 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 106 E. Doty STE 300		Amount of Each Disbursement this Period 215842.33
City Madison State WI Zip Code 53703	Category/ Type	
Purpose of Disbursement Printing - not FEA		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Persuasion Partners Inc.		Transaction ID: SB21B.26333 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 106 E. Doty STE 300		Amount of Each Disbursement this Period 1000.00
City Madison State WI Zip Code 53703	Category/ Type	
Purpose of Disbursement Political consultant		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ryan Phillips		Transaction ID: SB21B.26432 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 4301 60th St		Amount of Each Disbursement this Period 238.00
City Kenosha State WI Zip Code 53144	Category/ Type	
Purpose of Disbursement Expense reimbursement for food		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	217080.33
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Pick 'n Save - West Allis

Full Name (Last, First, Middle Initial)
Pick 'n Save - West Allis

Mailing Address 6760 W National Ave

City West Allis State WI Zip Code 53214

Purpose of Disbursement
Food for 72 hour staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21B.27775

Date of Disbursement

10 / 28 / 2006

Amount of Each Disbursement this Period

212.73

[MEMO ITEM]

B. Pinkus Market

Full Name (Last, First, Middle Initial)
Pinkus Market

Mailing Address 301 N Hamilton Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Food for staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21B.26935

Date of Disbursement

10 / 20 / 2006

Amount of Each Disbursement this Period

32.57

[MEMO ITEM]

C. Pinkus Market

Full Name (Last, First, Middle Initial)
Pinkus Market

Mailing Address 301 N Hamilton Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Food for staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21B.26938

Date of Disbursement

10 / 22 / 2006

Amount of Each Disbursement this Period

32.57

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Pinkus Market		Transaction ID: SB21B.26951 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 301 N Hamilton Street		Amount of Each Disbursement this Period 38.36
City Madison State WI Zip Code 53703	[MEMO ITEM]	
Purpose of Disbursement Staff food Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. PostMaster		Transaction ID: SB21B.26331 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address PO Box 7005		Amount of Each Disbursement this Period 1000.00
City Madison State WI Zip Code 53707	[MEMO ITEM]	
Purpose of Disbursement Postage for Bus Reply Mail Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. PostMaster		Transaction ID: SB21B.26854 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 7005		Amount of Each Disbursement this Period 341.07
City Madison State WI Zip Code 53707	[MEMO ITEM]	
Purpose of Disbursement Postage for GOTV postcards Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1341.07
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 98 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. PostMaster		Transaction ID: SB21B.26408 Date of Disbursement 11 / 21 / 2006	
Mailing Address PO Box 7005		Amount of Each Disbursement this Period 500.00	
City Madison State WI Zip Code 53707	Purpose of Disbursement Postage for Bus Reply Mail	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christopher Reader		Transaction ID: SB21B.26434 Date of Disbursement 10 / 28 / 2006	
Mailing Address 321 W Main St #202		Amount of Each Disbursement this Period 1400.00	
City Madison State WI Zip Code 53186	Purpose of Disbursement Expense reimbursement for food	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Reinhart Boerner Van Deuren		Transaction ID: SB21B.26373 Date of Disbursement 11 / 02 / 2006	
Mailing Address PO Box 2965		Amount of Each Disbursement this Period 525.00	
City Milwaukee State WI Zip Code 53201	Purpose of Disbursement Legal fees	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2425.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Rivertyme Catering		Transaction ID: SB21B.26867 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address 111 East Kimball St		Amount of Each Disbursement this Period 1200.00
City Appleton State WI Zip Code 54911	Purpose of Disbursement Field office refreshments Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Rocky Rococo		Transaction ID: SB21B.26952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1301 Regent		Amount of Each Disbursement this Period 65.54
City Madison State WI Zip Code 53711	Purpose of Disbursement Staff meal Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Sam's Club		Transaction ID: SB21B.27778 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6
Mailing Address 600 N. Springdale Rd.		Amount of Each Disbursement this Period 240.10
City Waukesha State WI Zip Code 53186	Purpose of Disbursement Food for 72 hour staff Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

PAGE 100 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Chirag Shah		Transaction ID: SB21B.26435 Date of Disbursement 10 / 28 / 2006	
Mailing Address 521 W. Dayton St Apt 2		Amount of Each Disbursement this Period 722.00	
City Madison State WI Zip Code 53703	Purpose of Disbursement Expense reimbursement for food		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Super 8 Motel - Marinette		Transaction ID: SB21B.26995 Date of Disbursement 11 / 08 / 2006	
Mailing Address 1508 Marinette Ave		Amount of Each Disbursement this Period 243.32	
City Marinette State WI Zip Code 54143	Purpose of Disbursement Room Rental - not FEA		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Super 8 Motel - Marinette		Transaction ID: SB21B.27007 Date of Disbursement 11 / 08 / 2006	
Mailing Address 1508 Marinette Ave		Amount of Each Disbursement this Period 60.83	
City Marinette State WI Zip Code 54143	Purpose of Disbursement Room Rental - not FEA		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

722.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 101 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Super 8 Motel - Marinette		Transaction ID: SB21B.27008 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 1508 Marinette Ave		Amount of Each Disbursement this Period 304.15
City Marinette State WI Zip Code 54143	[MEMO ITEM]	
Purpose of Disbursement Room Rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Super 8 Motel - Marinette		Transaction ID: SB21B.27009 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 1508 Marinette Ave		Amount of Each Disbursement this Period 243.32
City Marinette State WI Zip Code 54143	[MEMO ITEM]	
Purpose of Disbursement Room Rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Super 8 Motel - Shawano		Transaction ID: SB21B.27000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 211 Waukechon St		Amount of Each Disbursement this Period 282.90
City Shawano State WI Zip Code 54166	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 102 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Super 8 Motel - Shawano		Transaction ID: SB21B.27002 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 211 Waukechon St		Amount of Each Disbursement this Period 282.90
City Shawano State WI Zip Code 54166	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Super 8 Motel - Shawano		Transaction ID: SB21B.27003 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 211 Waukechon St		Amount of Each Disbursement this Period 282.90
City Shawano State WI Zip Code 54166	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Super 8 Motel - Shawano		Transaction ID: SB21B.27004 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 211 Waukechon St		Amount of Each Disbursement this Period 310.45
City Shawano State WI Zip Code 54166	[MEMO ITEM]	
Purpose of Disbursement Room rental - not FEA		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 103 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Symantec Corporation		Transaction ID: SB21B.26923 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 20330 Stevens Creek Blvd.		Amount of Each Disbursement this Period 39.99
City Cupertino State CA Zip Code 95014	[MEMO ITEM]	
Purpose of Disbursement Anti-virus software Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. TDS Metrocom		Transaction ID: SB21B.26375 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address PO Box 1010		Amount of Each Disbursement this Period 583.48
City Monroe State WI Zip Code 53566	[MEMO ITEM]	
Purpose of Disbursement Phone bill Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. The Camera Company Square		Transaction ID: SB21B.26450 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 24 North Carroll Street		Amount of Each Disbursement this Period 428.34
City Madison State WI Zip Code 53703	[MEMO ITEM]	
Purpose of Disbursement Photos Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1011.82
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 104 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Tony's Instant Litho Printing		Transaction ID: SB21B.26376 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 2249 Sherman Avenue		Amount of Each Disbursement this Period 888.44
City Madison State WI Zip Code 53704	Purpose of Disbursement Printing - not FEA	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Transaction ID: SB21B.26912 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 5066		Amount of Each Disbursement this Period 1661.50
City Milwaukee State WI Zip Code 53201-5066	Purpose of Disbursement Finance mailing - not FEA	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Unisource Direct		Transaction ID: SB21B.26377 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 12580.08
City Madison State WI Zip Code 53718	Purpose of Disbursement Finance mailing - not FEA	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	13468.52
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 105 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Unisource Direct		Transaction ID: SB21B.26379 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 2900.00
City Madison State WI Zip Code 53718	Purpose of Disbursement Finance mailing - not FEA Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. UPS		Transaction ID: SB21B.26910 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 505820		Amount of Each Disbursement this Period 10.48
City The Lakes State NV Zip Code 88905	Purpose of Disbursement Shipping costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. UPS		Transaction ID: SB21B.26915 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address P.O. Box 505820		Amount of Each Disbursement this Period 13.87
City The Lakes State NV Zip Code 88905	Purpose of Disbursement Shipping costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	2900.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. UPS</p> <p>Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 505820</p>		<p>Transaction ID: SB21B.26943 Date of Disbursement 10 / 24 / 2006</p>
<p>City The Lakes State NV Zip Code 88905</p>	<p>Purpose of Disbursement Shipping costs - not FEA</p>	<p>Amount of Each Disbursement this Period 382.16</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

[MEMO ITEM]

<p>B. Marci Van Adestine</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 2387 Town Hall Rd</p>		<p>Transaction ID: SB21B.26436 Date of Disbursement 10 / 28 / 2006</p>
<p>City Green Bay State WI Zip Code 54311</p>	<p>Purpose of Disbursement Expense reimbursement for food</p>	<p>Amount of Each Disbursement this Period 800.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. Jason Vick</p> <p>Full Name (Last, First, Middle Initial) Mailing Address W3711 Highview Drive</p>		<p>Transaction ID: SB21B.26437 Date of Disbursement 10 / 28 / 2006</p>
<p>City Appleton State WI Zip Code 54913</p>	<p>Purpose of Disbursement Expense reimbursement for food</p>	<p>Amount of Each Disbursement this Period 450.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>1250.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 107 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. VMPS. LLC		Transaction ID: SB21B.26983 Date of Disbursement 10 / 19 / 2006
Mailing Address PO Box 2741		Amount of Each Disbursement this Period 5000.00
City Madison	State WI Zip Code 53701	
Purpose of Disbursement Political Consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. VMPS. LLC		Transaction ID: SB21B.26446 Date of Disbursement 10 / 31 / 2006
Mailing Address PO Box 2741		Amount of Each Disbursement this Period 22999.00
City Madison	State WI Zip Code 53701	
Purpose of Disbursement Political consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Vonage		Transaction ID: SB21B.26896 Date of Disbursement 08 / 17 / 2006
Mailing Address 2147 Rte. 27		Amount of Each Disbursement this Period 232.05
City Edison	State NJ Zip Code 08817	
Purpose of Disbursement Phone bill		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	27999.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 108 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Vonage		Transaction ID: SB21B.26911 Date of Disbursement 09 / 16 / 2006
Mailing Address 2147 Rte. 27		Amount of Each Disbursement this Period 285.26
City Edison State NJ Zip Code 08817	Purpose of Disbursement Phone bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Vonage		Transaction ID: SB21B.26933 Date of Disbursement 10 / 17 / 2006
Mailing Address 2147 Rte. 27		Amount of Each Disbursement this Period 297.51
City Edison State NJ Zip Code 08817	Purpose of Disbursement Phone bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Vonage		Transaction ID: SB21B.26985 Date of Disbursement 11 / 09 / 2006
Mailing Address 2147 Rte. 27		Amount of Each Disbursement this Period 2.20
City Edison State NJ Zip Code 08817	Purpose of Disbursement Phone bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

PAGE 109 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Vonage		Transaction ID: SB21B.26986	
Mailing Address 2147 Rte. 27		Date of Disbursement 11 / 09 / 2006	
City Edison	State NJ	Zip Code 08817	Amount of Each Disbursement this Period 2.20
Purpose of Disbursement Phone bill		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Vonage		Transaction ID: SB21B.26987	
Mailing Address 2147 Rte. 27		Date of Disbursement 11 / 09 / 2006	
City Edison	State NJ	Zip Code 08817	Amount of Each Disbursement this Period 2.20
Purpose of Disbursement Phone bill		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Vonage		Transaction ID: SB21B.26988	
Mailing Address 2147 Rte. 27		Date of Disbursement 11 / 09 / 2006	
City Edison	State NJ	Zip Code 08817	Amount of Each Disbursement this Period 4.40
Purpose of Disbursement Phone bill		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 110 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Vonage		Transaction ID: SB21B.26994 Date of Disbursement 11 / 09 / 2006	
Mailing Address 2147 Rte. 27		Amount of Each Disbursement this Period 210.95	
City Edison State NJ Zip Code 08817	Purpose of Disbursement Phone bill	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Walmart		Transaction ID: SB21B.26937 Date of Disbursement 10 / 20 / 2006	
Mailing Address 4198 Nakoosa Trail		Amount of Each Disbursement this Period 111.97	
City Madison State WI Zip Code 53714	Purpose of Disbursement Office supplies	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. Walmart		Transaction ID: SB21B.27769 Date of Disbursement 10 / 28 / 2006	
Mailing Address 4198 Nakoosa Trail		Amount of Each Disbursement this Period 9156.72	
City Madison State WI Zip Code 53714	Purpose of Disbursement Tracphone minutes	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 111 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Walmart		Transaction ID: SB21B.26864 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 4198 Nakoosa Trail		Amount of Each Disbursement this Period 1500.40
City Madison State WI Zip Code 53714	Category/ Type	
Purpose of Disbursement Tracfores		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Walmart		Transaction ID: SB21B.26961 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 4198 Nakoosa Trail		Amount of Each Disbursement this Period 36.02
City Madison State WI Zip Code 53714	Category/ Type	
Purpose of Disbursement Office supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Rick Wiley		Transaction ID: SB21B.26453 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period 450.00
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Expense reimbursement - gas cards		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1950.40
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 112 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Windway Capital Corp		Transaction ID: SB21B.26438	
Mailing Address 630 Riverfront Drive #200		Date of Disbursement 10 / 30 / 2006	
City Sheboygan	State WI	Zip Code 53082	Amount of Each Disbursement this Period 13000.00
Purpose of Disbursement List development - not FEA		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	13000.00
TOTAL This Period (last page this line number only)	▶	506077.62

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 113 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. M&I Bank of Southern Wisconsin

Transaction ID: SB26.26451

Date of Disbursement

Mailing Address P.O. Box 5920

^M <input type="text"/> 1	^M <input type="text"/> 1	/	^D <input type="text"/> 0	^D <input type="text"/> 3	/	^Y <input type="text"/> 2	^Y <input type="text"/> 0	^Y <input type="text"/> 0	^Y <input type="text"/> 6
-------------------------------------	-------------------------------------	---	-------------------------------------	-------------------------------------	---	-------------------------------------	-------------------------------------	-------------------------------------	-------------------------------------

City	State	Zip Code
Madison	WI	53705

Amount of Each Disbursement this Period

Purpose of Disbursement
Pay down line of credit

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 114 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. American Funds Service Company		Transaction ID: SB30B.26361	
Mailing Address PO Box 6164		Date of Disbursement 10 / 30 / 2006	
City Indianapolis	State IN	Zip Code 46206	Amount of Each Disbursement this Period 565.17
Purpose of Disbursement Employee Simple IRA Plan		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. American Funds Service Company		Transaction ID: SB30B.26463	
Mailing Address PO Box 6164		Date of Disbursement 10 / 30 / 2006	
City Indianapolis	State IN	Zip Code 46206	Amount of Each Disbursement this Period 396.91
Purpose of Disbursement Employee Simple IRA Plan		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. American Funds Service Company		Transaction ID: SB30B.26380	
Mailing Address PO Box 6164		Date of Disbursement 11 / 14 / 2006	
City Indianapolis	State IN	Zip Code 46206	Amount of Each Disbursement this Period 491.62
Purpose of Disbursement Employee Simple IRA Plan		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1453.70
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 115 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. American Funds Service Company		Transaction ID: SB30B.26473 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address PO Box 6164		Amount of Each Disbursement this Period 396.93
City Indianapolis	State IN Zip Code 46206	
Purpose of Disbursement Employee Simple IRA Plan		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Kevin Binversie		Transaction ID: SB30B.26336 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 919 N 5th Street		Amount of Each Disbursement this Period 1026.25
City Sheboygan	State WI Zip Code 53081	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kevin Binversie		Transaction ID: SB30B.26381 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 919 N 5th Street		Amount of Each Disbursement this Period 879.74
City Sheboygan	State WI Zip Code 53081	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2302.92
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 116 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Dudley Bowlby		Transaction ID: SB30B.26350 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 250 Femrite Drive		Amount of Each Disbursement this Period 1021.78
City Madison State WI Zip Code 53716	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dudley Bowlby		Transaction ID: SB30B.26395 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 250 Femrite Drive		Amount of Each Disbursement this Period 626.77
City Madison State WI Zip Code 53716	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Aaron Brandt		Transaction ID: SB30B.26348 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 1306 Jefferson Court		Amount of Each Disbursement this Period 324.64
City Eau Claire State WI Zip Code 54701	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1973.19
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 117 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Aaron Brandt		Transaction ID: SB30B.26382	
Mailing Address 1306 Jefferson Court		Date of Disbursement 11 / 15 / 2006	
City Eau Claire	State WI	Zip Code 54701	Amount of Each Disbursement this Period 324.64
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Andrew Davis		Transaction ID: SB30B.26466	
Mailing Address 827 Michigan Ave		Date of Disbursement 10 / 31 / 2006	
City South Milwaukee	State WI	Zip Code 53172	Amount of Each Disbursement this Period 798.76
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Andrew Davis		Transaction ID: SB30B.26383	
Mailing Address 827 Michigan Ave		Date of Disbursement 11 / 15 / 2006	
City South Milwaukee	State WI	Zip Code 53172	Amount of Each Disbursement this Period 798.76
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1922.16
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Norman Dawson		Transaction ID: SB30B.26362 Date of Disbursement 10 / 30 / 2006
Mailing Address PO Box 698		Amount of Each Disbursement this Period 142.92
City Wyocena State WI Zip Code 53969	Purpose of Disbursement Payroll Garnishment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Norman Dawson		Transaction ID: SB30B.26406 Date of Disbursement 11 / 15 / 2006
Mailing Address PO Box 698		Amount of Each Disbursement this Period 64.33
City Wyocena State WI Zip Code 53969	Purpose of Disbursement Payroll garnishment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Dean Care		Transaction ID: SB30B.26364 Date of Disbursement 10 / 30 / 2006
Mailing Address PO Box 88610		Amount of Each Disbursement this Period 2855.22
City Milwaukee State WI Zip Code 53288	Purpose of Disbursement Health insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3062.47
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 119 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Dean Care		Transaction ID: SB30B.26465 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 88610		Amount of Each Disbursement this Period 2108.47
City Milwaukee State WI Zip Code 53288	Purpose of Disbursement Health insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Robert Delaporte		Transaction ID: SB30B.26467 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 5657 Barbara Dr		Amount of Each Disbursement this Period 2072.63
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Robert Delaporte		Transaction ID: SB30B.26384 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 5657 Barbara Dr		Amount of Each Disbursement this Period 2072.64
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	6253.74
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Richard Dickie		Transaction ID: SB30B.26351 Date of Disbursement 10 / 30 / 2006	
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period 1186.39	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Dickie		Transaction ID: SB30B.26396 Date of Disbursement 11 / 15 / 2006	
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period 1185.36	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. FLS-DCI		Transaction ID: SB30B.27764 Date of Disbursement 11 / 10 / 2006	
Mailing Address 2401 W Behrend Drive STE 7		Amount of Each Disbursement this Period 2690.00	
City Phoenix State AZ Zip Code 85027	Purpose of Disbursement Automated Phone Calls Candidate Name GARD FOR CONGRESS Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5061.75
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 121 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Jason Gammeter		Transaction ID: SB30B.26352 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period 571.69
City Wyocena State WI Zip Code 53969	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jason Gammeter		Transaction ID: SB30B.26397 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period 257.30
City Wyocena State WI Zip Code 53969	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Guardian		Transaction ID: SB30B.26363 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 95101		Amount of Each Disbursement this Period 638.09
City Chicago State IL Zip Code 60694	Purpose of Disbursement Dental Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1467.08
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 122 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Guardian		Transaction ID: SB30B.26464 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 95101		Amount of Each Disbursement this Period 440.51
City Chicago State IL Zip Code 60694	Purpose of Disbursement Dental insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeff Harvey		Transaction ID: SB30B.26468 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 2937 Fish Hatchery Rd #112		Amount of Each Disbursement this Period 1220.21
City Madison State WI Zip Code 53713	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeff Harvey		Transaction ID: SB30B.26474 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 2937 Fish Hatchery Rd #112		Amount of Each Disbursement this Period 1275.97
City Madison State WI Zip Code 53713	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2936.69
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 123 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Donna Heimbach</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3002 Dianne Drive</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB30B.26353</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="435.99"/></p>
<p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Donna Heimbach</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3002 Dianne Drive</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB30B.26398</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="578.85"/></p>
<p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. IRS</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Payment Center</p> <p>City Kansas City State MO Zip Code 64999</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB30B.26360</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5543.92"/></p>
<p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="6558.76"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. IRS		Transaction ID: SB30B.26462 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address Payment Center		Amount of Each Disbursement this Period 3023.84
City Kansas City	State MO	
Zip Code 64999	Category/ Type	
Purpose of Disbursement Payroll taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. IRS		Transaction ID: SB30B.26404 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address Payment Center		Amount of Each Disbursement this Period 5285.74
City Kansas City	State MO	
Zip Code 64999	Category/ Type	
Purpose of Disbursement Payroll taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. IRS		Transaction ID: SB30B.26478 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address Payment Center		Amount of Each Disbursement this Period 2021.08
City Kansas City	State MO	
Zip Code 64999	Category/ Type	
Purpose of Disbursement Payroll taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10330.66
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Kimberly Jorns		Transaction ID: SB30B.26338 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period 1291.73
City De Pere State WI Zip Code 54115	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kimberly Jorns		Transaction ID: SB30B.26385 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period 1349.46
City De Pere State WI Zip Code 54115	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Brian Kind		Transaction ID: SB30B.26339 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period 1495.33
City Madison State WI Zip Code 53711	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4136.52
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Brian Kind		Transaction ID: SB30B.26386 Date of Disbursement 11 / 15 / 2006	
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period 1495.34	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Jill Latham		Transaction ID: SB30B.26340 Date of Disbursement 10 / 30 / 2006	
Mailing Address 5550 Caddis Bend #405		Amount of Each Disbursement this Period 1399.16	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Jill Latham		Transaction ID: SB30B.26387 Date of Disbursement 11 / 15 / 2006	
Mailing Address 5550 Caddis Bend #405		Amount of Each Disbursement this Period 1721.06	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	4615.56
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 127 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Larry Loomis		Transaction ID: SB30B.26354 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period 760.58	
City Madison State WI Zip Code 53719	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Larry Loomis		Transaction ID: SB30B.26399 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period 503.48	
City Madison State WI Zip Code 53719	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. M&I Merchant Services		Transaction ID: SB30B.26366 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 591.66	
City Madison State WI Zip Code 53705	Purpose of Disbursement Credit card processing fees	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1855.72
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 128 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Ryan Mahoney		Transaction ID: SB30B.26341 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period 248.64
City Bethesda State MD Zip Code 20817	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ryan Mahoney		Transaction ID: SB30B.26388 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period 411.72
City Bethesda State MD Zip Code 20817	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kathryn Mize		Transaction ID: SB30B.26342 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 414 N Livingston Street #2		Amount of Each Disbursement this Period 1214.60
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1874.96
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 129 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Kathryn Mize		Transaction ID: SB30B.26389 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 414 N Livingston Street #2		Amount of Each Disbursement this Period 1214.61	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thomas Mooney		Transaction ID: SB30B.26469 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 163 Avon St. Apt 4		Amount of Each Disbursement this Period 1090.10	
City La Crosse State WI Zip Code 54603	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas Mooney		Transaction ID: SB30B.26475 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 163 Avon St. Apt 4		Amount of Each Disbursement this Period 1185.48	
City La Crosse State WI Zip Code 54603	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3490.19
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 130 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. W. Scott Nelson		Transaction ID: SB30B.26343 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 6191 Washington Circle		Amount of Each Disbursement this Period 1658.45
City Wauwatosa State WI Zip Code 53213	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. W. Scott Nelson		Transaction ID: SB30B.26394 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 6191 Washington Circle		Amount of Each Disbursement this Period 838.41
City Wauwatosa State WI Zip Code 53213	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeffery Noltner		Transaction ID: SB30B.26355 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period 159.13
City Madison State WI Zip Code 53718	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2655.99
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 131 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Jeffery Noltner		Transaction ID: SB30B.26400 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period 82.47
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sherrie Osegard		Transaction ID: SB30B.26344 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period 930.64
City Madison State WI Zip Code 53719	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sherrie Osegard		Transaction ID: SB30B.26390 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period 926.65
City Madison State WI Zip Code 53719	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1939.76
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 132 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Persuasion Partners Inc.		Transaction ID: SB30B.26410 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 106 E. Doty STE 300		Amount of Each Disbursement this Period 16500.00
City Madison State WI Zip Code 53703	Purpose of Disbursement Political Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Sarah Petre		Transaction ID: SB30B.26345 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 515 N Lake Street		Amount of Each Disbursement this Period 266.37
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Sarah Petre		Transaction ID: SB30B.26391 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 515 N Lake Street		Amount of Each Disbursement this Period 148.10
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	16914.47
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 133 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Scott Poole		Transaction ID: SB30B.26356 Date of Disbursement 10 / 30 / 2006
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period 354.33
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Scott Poole		Transaction ID: SB30B.26403 Date of Disbursement 11 / 15 / 2006
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period 225.65
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Karoline Rezin		Transaction ID: SB30B.26346 Date of Disbursement 10 / 30 / 2006
Mailing Address 1836 Gruman		Amount of Each Disbursement this Period 471.49
City Tomah State WI Zip Code 54660	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1051.47
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 134 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Karoline Rezin Full Name (Last, First, Middle Initial) Mailing Address 1836 Gruman City Tomah State WI Zip Code 54660 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.26392 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 224.13 Category/Type
---	--	--

B. Daniel Romportl Full Name (Last, First, Middle Initial) Mailing Address 841 Skibborean Way City Hartford State WI Zip Code 53027 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.26470 Date of Disbursement 10 / 31 / 2006 Amount of Each Disbursement this Period 906.25 Category/Type
--	--	--

C. Daniel Romportl Full Name (Last, First, Middle Initial) Mailing Address 841 Skibborean Way City Hartford State WI Zip Code 53027 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.26476 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 931.40 Category/Type
--	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	2061.78
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 135 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. James Sanders		Transaction ID: SB30B.26357 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period 730.73
City Madison State WI Zip Code 53704	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. James Sanders		Transaction ID: SB30B.26401 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period 466.52
City Madison State WI Zip Code 53704	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. State of Wisconsin Legislative Human Resources		Transaction ID: SB30B.26443 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address PO Box 7882		Amount of Each Disbursement this Period 1292.45
City Madison State WI Zip Code 53707	Purpose of Disbursement Health insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2489.70
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 136 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Stephan Thompson		Transaction ID: SB30B.26347 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 3313 S 123 St		Amount of Each Disbursement this Period 402.96
City West Allis State WI Zip Code 53227		
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stephan Thompson		Transaction ID: SB30B.26393 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 3313 S 123 St		Amount of Each Disbursement this Period 402.96
City West Allis State WI Zip Code 53227		
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Rick Wiley		Transaction ID: SB30B.26471 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period 2160.01
City Madison State WI Zip Code 53718		
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2965.93
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 137 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Rick Wiley Full Name (Last, First, Middle Initial) Mailing Address 529 Aztalan Drive City Madison State WI Zip Code 53718 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.26477 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 3060.93 Category/Type
---	--	---

B. Joshua Wilson Full Name (Last, First, Middle Initial) Mailing Address 641 West Main Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.26358 Date of Disbursement 10 / 30 / 2006 Amount of Each Disbursement this Period 724.13 Category/Type
---	--	--

C. Joshua Wilson Full Name (Last, First, Middle Initial) Mailing Address 641 West Main Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.26402 Date of Disbursement 11 / 15 / 2006 Amount of Each Disbursement this Period 350.22 Category/Type
---	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	4135.28
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 138 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) A. Wisc. Dept of Revenue		Transaction ID: SB30B.26359 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 1744.71
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll tax Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Wisc. Dept of Revenue		Transaction ID: SB30B.26461 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 1588.03
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wisc. Dept of Revenue		Transaction ID: SB30B.26405 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 1068.17
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll taxes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4400.91
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

PAGE 139 / 154

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Payroll taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.26479

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 140 / 154 FOR LINE 13 OF FORM 3X
---	--

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

Transaction ID: SC/10.6376

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan 110000.00	Cumulative Payment To Date 99000.00	Balance Outstanding at Close of This Period 11000.00
--------------------------------------	--	---

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 1 D D 0 9 Y Y Y Y 2 0 0 2	04/30/02	5.75 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%; text-align: center;" type="text" value="11000.00"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 141 / 154 FOR LINE 13 OF FORM 3X
---	--

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
34000.00	0.00	34000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 3 1 Y Y Y Y 2 0 0 3		5.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%;" type="text" value="34000.00"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%;" type="text" value="45000.00"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

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

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

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

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

NAME OF ACCOUNT Republican Party of Wisconsin	DATE OF RECEIPT M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 6178.27
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		6178.27
i) Total Administrative		Transaction ID: H3.26888
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	6178.27
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	6178.27

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2420 East Springs Dr			Allocated Activity or Event Year-To-Date 140425.89		
City Madison	State WI	Zip Code 53701	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office supplies			Transaction ID: H4.26334		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.55		581.09		683.64

B. Full Name (Last, First, Middle Initial) Rick Wiley			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 529 Aztalan Drive			Allocated Activity or Event Year-To-Date 149582.61		
City Madison	State WI	Zip Code 53718	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Expense reimbursement - tracfone minutes			Transaction ID: H4.26460		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1373.51		7783.21		9156.72

C. Full Name (Last, First, Middle Initial) Robert Delaporte			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5657 Barbara Dr			Allocated Activity or Event Year-To-Date 149631.68		
City Fitchburg	State WI	Zip Code 53711	Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: podium rental reimbursement - not FEA			Transaction ID: H4.26439		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.36		41.71		49.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1483.42		8406.01		9889.43

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Kimberly Jorns			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 233 N. Broadway #136			Allocated Activity or Event Year-To-Date 150055.64		
City De Pere	State WI	Zip Code 54115	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: Event supply reimbursement - not FEA			Transaction ID: H4.26440		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.59		360.37		423.96

B. Full Name (Last, First, Middle Initial) Brian Kind			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6403 Alison Ln			Allocated Activity or Event Year-To-Date 150205.41		
City Madison	State WI	Zip Code 53711	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: Expense reimbursement - office labels			Transaction ID: H4.26441		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.47		127.30		149.77

C. Full Name (Last, First, Middle Initial) Jill Latham			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5550 Caddis Bend #405			Allocated Activity or Event Year-To-Date 150489.55		
City Fitchburg	State WI	Zip Code 53711	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>		
Purpose of Disbursement: gas, labels & tracfone reimbursement			Transaction ID: H4.26442		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.62		241.52		284.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.68		729.19		857.87

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Andrew Davis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 827 Michigan Ave			Allocated Activity or Event Year-To-Date 151137.60		
City South Milwaukee	State WI	Zip Code 53172	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office supply & mileage Reimbursement			Transaction ID: H4.26337		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.21		550.84		648.05

B. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue - Sls Tax			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 93389			Allocated Activity or Event Year-To-Date 151708.19		
City Milwaukee	State WI	Zip Code 53293	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Sales/Use Tax			Transaction ID: H4.26365		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.59		485.00		570.59

C. Full Name (Last, First, Middle Initial) City of West Allis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7325 West Greenfield Avenue			Allocated Activity or Event Year-To-Date 151808.10		
City West Allis	State WI	Zip Code 53214	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Water/sewage bill for field ofc			Transaction ID: H4.26367		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.99		84.92		99.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.79		1120.76		1318.55

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) FedEx			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1140			Allocated Activity or Event Year-To-Date 152046.42		
City Memphis	State TN	Zip Code 38101	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Shipping charges			Transaction ID: H4.26368		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.75		202.57		238.32

B. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 85460			Allocated Activity or Event Year-To-Date 153831.52		
City Louisville	State KY	Zip Code 40285	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Postage meter lease			Transaction ID: H4.26372		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.76		1517.34		1785.10

C. Full Name (Last, First, Middle Initial) RhinoTeck Computer Products			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2301 E. Del Amo Blvd.			Allocated Activity or Event Year-To-Date 154709.10		
City Carson	State CA	Zip Code 90220	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Printer toner			Transaction ID: H4.26374		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.64		745.94		877.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
435.15		2465.85		2901.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
West Bend Mutual Insurance

Mailing Address
1900 South 18th Ave

City State Zip Code
West Bend WI 53095

Purpose of Disbursement:
Building insurance

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

156971.60

Date / /

Transaction ID: H4.26378

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
339.38		1923.12		2262.50

B. Full Name (Last, First, Middle Initial)
Rick Wiley

Mailing Address
529 Aztalan Drive

City State Zip Code
Madison WI 53718

Purpose of Disbursement:
Expense reimbursement - gas cards

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

159621.60

Date / /

Transaction ID: H4.26472

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
397.50		2252.50		2650.00

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
PO Box 9001309

City State Zip Code
Louisville KY 40290-1309

Purpose of Disbursement:
Phone bill

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160395.45

Date / /

Transaction ID: H4.26872

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.08		657.77		773.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
852.96		4833.39		5686.35

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) AT&T Capital Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13160 Collections Center Drive			Allocated Activity or Event Year-To-Date [161282.19]	
City Chicago, IL 60693	State IL	Zip Code 60693	Date M M / D D / Y Y Y Y [1 1 / 0 2 / 2 0 0 6] Transaction ID: H4.26873	
Purpose of Disbursement: Phone maintenance				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[133.01]		[753.73]		[886.74]

B. Full Name (Last, First, Middle Initial) Badgerland Chemical & Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 620303			Allocated Activity or Event Year-To-Date [161333.14]	
City Middleton	State WI	Zip Code 53562	Date M M / D D / Y Y Y Y [1 1 / 0 2 / 2 0 0 6] Transaction ID: H4.26874	
Purpose of Disbursement: Janitorial supplies				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[7.64]		[43.31]		[50.95]

C. Full Name (Last, First, Middle Initial) Charter Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 135 South LaSalle Street Dept 8123			Allocated Activity or Event Year-To-Date [161391.13]	
City Chicago	State IL	Zip Code 60674	Date M M / D D / Y Y Y Y [1 1 / 0 2 / 2 0 0 6] Transaction ID: H4.26875	
Purpose of Disbursement: Internet service				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[8.70]		[49.29]		[57.99]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[149.35]		[846.33]		[995.68]

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Doc Jams LLC

Mailing Address
3818 Hoepker Rd

City State Zip Code
Madison WI 53718

Purpose of Disbursement:
Printer maintenance

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

161499.80

Date 11 / 02 / 2006

Transaction ID: H4.26876

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.30		92.37		108.67

B. Full Name (Last, First, Middle Initial)
GFC Leasing

Mailing Address
PO Box 1129

City State Zip Code
Madison WI 53701

Purpose of Disbursement:
Copier lease

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

162599.40

Date 11 / 02 / 2006

Transaction ID: H4.26878

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.94		934.66		1099.60

C. Full Name (Last, First, Middle Initial)
GFC Leasing

Mailing Address
PO Box 1129

City State Zip Code
Madison WI 53701

Purpose of Disbursement:
Copier lease

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

163173.95

Date 11 / 02 / 2006

Transaction ID: H4.26879

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.18		488.37		574.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.42		1515.40		1782.82

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Gordon Fleisch Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 992			Allocated Activity or Event Year-To-Date 163889.13																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H4.26880			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	6																
Madison	WI	53701																							
Purpose of Disbursement: Copier toner			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.28		607.90		715.18

B. Full Name (Last, First, Middle Initial) MG&E			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 1231			Allocated Activity or Event Year-To-Date 164552.71																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H4.26881			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	6																
Madison	WI	53701																							
Purpose of Disbursement: Energy bill			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.54		564.04		663.58

C. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2420 East Springs Dr			Allocated Activity or Event Year-To-Date 166160.80																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H4.26882			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	6																
Madison	WI	53701																							
Purpose of Disbursement: Office supplies			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
241.21		1366.88		1608.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
448.03		2538.82		2986.85

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Pro One Janitorial Inc

Mailing Address
1486 Kenwood Center

City State Zip Code
Menasha WI 54952

Purpose of Disbursement:
Office janitorial services

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166660.80

Date MM / DD / YYYY
11 / 02 / 2006

Transaction ID: H4.26883

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

B. Full Name (Last, First, Middle Initial)
Shadow Fax

Mailing Address
4601 Helfesen Dr

City State Zip Code
Madison WI 53718

Purpose of Disbursement:
Fax toner

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167132.92

Date MM / DD / YYYY
11 / 02 / 2006

Transaction ID: H4.26884

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.82		401.30		472.12

C. Full Name (Last, First, Middle Initial)
Waste Management

Mailing Address
PO Box 9001505

City State Zip Code
Louisville KY 40290

Purpose of Disbursement:
Office waste disposal

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167239.96

Date MM / DD / YYYY
11 / 02 / 2006

Transaction ID: H4.26885

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.06		90.98		107.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.88		917.28		1079.16

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
WE Energies

Mailing Address
231 W Michigan Street

City State Zip Code
Milwaukee WI 53203

Purpose of Disbursement:
Electric bill

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167442.20

Date 11 / 02 / 2006

Transaction ID: H4.26886

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.34		171.90		202.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.34		171.90		202.24

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
4155.02	23544.93	27699.95

Image# 27930163453

Form/Schedule: **SA11A1** The receipt of \$8,000 from the Oneida Tribe of Indians on 10/30/06 exceeds the limits set forth in the Act. 2
Transaction ID: **SA11A1.26704** U.S.C. §441a(f) and 11 CFR §110.1(c). The total amount contributed by the Oneida Tribe in the 2006 calendar
year totals \$12,500. Accordingly, on 2/16/07, our Committee refunded \$2,500 to the Oneida Tribe, the amount
by which the contributions exceed limits. A copy of the refund check has been mailed to the FEC to the attention
of our Analyst.

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit
