

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Volunteers for Nehlen

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	87564.42	134037.61
(b) Total Contribution Refunds (from Line 20(d))	50.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87514.42	132037.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	53988.64	79802.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3751.64
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	53988.64	76051.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	65189.02	
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).....	62698.15	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Volunteers for Nehlen

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	47225.00	59225.00
(ii) Unitemized	40339.42	64522.48
(iii) TOTAL of contributions from individuals	87564.42	123747.48
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	70.13
(d) The Candidate	0.00	10220.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	87564.42	134037.61
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	32.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	32.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	3751.64
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	87564.42	137821.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	53988.64	79802.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	50.00	2000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	50.00	2000.00
21. OTHER DISBURSEMENTS	0.00	200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	54038.64	82002.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	31663.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	87564.42
25. SUBTOTAL (add Line 23 and Line 24).....	119227.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54038.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	65189.02

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

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

FOR LINE NUMBER: PAGE 5 OF 48
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Austin, T., S., ,

Mailing Address 6208 N Monticello Dr

City Cleburne State TX Zip Code 76033

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2017

Transaction ID : SA11AI.49011

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Baker, Carole, , ,

Mailing Address 4405 East Roosevelt Rd

City LITTLE ROCK State AR Zip Code 72206

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

Name of Employer Information requested Occupation Information requested
retired retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 09 / 2017

Transaction ID : SA11AI.49718

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Baker, Carole, , ,

Mailing Address 4405 East Roosevelt Rd

City LITTLE ROCK State AR Zip Code 72206

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

Name of Employer Information requested Occupation Information requested
retired retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 23 / 2017

Transaction ID : SA11AI.49396

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Baker, Carole, , ,

Mailing Address 4405 East Roosevelt Rd

City: LITTLE ROCK State: AR Zip Code: 72206

FEC ID number of contributing federal political committee: C

Name of Employer: retired Occupation: retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 550.00

Date of Receipt: 09 / 05 / 2017

Transaction ID : SA11AI.50389

Amount of Each Receipt this Period: 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Berg, Laurence, , ,

Mailing Address 151 Fairway Ct

City: Onalaska State: WI Zip Code: 54650

FEC ID number of contributing federal political committee: C

Name of Employer: Gundersen Health System Occupation: Physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 04 / 2017

Transaction ID : SA11AI.49774

Amount of Each Receipt this Period: 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Berg, Laurence, , ,

Mailing Address 151 Fairway Ct

City: Onalaska State: WI Zip Code: 54650

FEC ID number of contributing federal political committee: C

Name of Employer: Gundersen Health System Occupation: Physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 08 / 15 / 2017

Transaction ID : SA11AI.49619

Amount of Each Receipt this Period: 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 48
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Berg, Laurence, , ,

Mailing Address 151 Fairway Ct

City Onalaska State WI Zip Code 54650

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

Name of Employer Gundersen Health System Occupation Physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 31 2017

Transaction ID : SA11AI.49222

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Berg, Laurence, , ,

Mailing Address 151 Fairway Ct

City Onalaska State WI Zip Code 54650

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

Name of Employer Gundersen Health System Occupation Physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 16 2017

Transaction ID : SA11AI.50156

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Berg, Laurence, , ,

Mailing Address 151 Fairway Ct

City Onalaska State WI Zip Code 54650

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

Name of Employer Gundersen Health System Occupation Physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 29 2017

Transaction ID : SA11AI.49898

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Berger, Russell, , ,

Mailing Address PO Box 1233

City: Front Royal State: VA Zip Code: 22630

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Date of Receipt: 09 / 12 / 2017

Transaction ID : SA11AI.50276

Amount of Each Receipt this Period: 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bowling, George R, , ,

Mailing Address P. O. Box 2870

City: PADUCAH State: KY Zip Code: 42002

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

Name of Employer: Self Occupation: Administration

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt: 09 / 29 / 2017

Transaction ID : SA11AI.49915

Amount of Each Receipt this Period: 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Boyd, Matthew, , ,

Mailing Address 1420 E Ridgewood Dr

City: Columbia City State: IN Zip Code: 46725

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

Name of Employer: Boyd Machine & Repair Occupation: Attorney

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt: 08 / 23 / 2017

Transaction ID : SA11AI.48981

Amount of Each Receipt this Period: 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Brannum, Caroline, , ,

Mailing Address 119 N Rockfern Ct

City SPRING State TX Zip Code 77380

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2017

Transaction ID : SA11AI.50239

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 1859 Devonshire Drive

City FLORENCE State SC Zip Code 29505

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

Name of Employer Southwest Airlines Occupation Pilot

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2017

Transaction ID : SA11AI.49461

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Brown, Christopher, , ,

Mailing Address 4630 W McNab Rd
Apt A2

City Pompano Beach State FL Zip Code 33069

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

Name of Employer Retired Occupation Retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2017

Transaction ID : SA11AI.50146

Amount of Each Receipt this Period
 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3950.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Childs, William, , ,

Mailing Address 3538 Eastwind St

City INDIANAPOLIS State IN Zip Code 46227

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 18 2017

Transaction ID : SA11AI.49519

Amount of Each Receipt this Period
 _____ 50.00

Memo Item

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

Mailing Address 3538 Eastwind St

City INDIANAPOLIS State IN Zip Code 46227

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 06 2017

Transaction ID : SA11AI.50354

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Cornell, Delor, , ,

Mailing Address PO Box 807

City Woodbury State NJ Zip Code 08096

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

Name of Employer Cornell and Company Occupation CEO

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 08 2017

Transaction ID : SA11AI.50483

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 2150.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Edmonston, Brian, , ,
 Mailing Address 13460 old winery rd
 City poaway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ICODING Manager
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2017
Transaction ID : SA11AI.49870
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Evans, Bonnie, , ,
 Mailing Address 534 Rexford Rd.
 City FLORENCE State MS Zip Code 39073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 15 2017
Transaction ID : SA11AI.49605
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Flores, Frank, , ,
 Mailing Address 11309 Harbor Breeze Dr.
 City MONTGOMERY State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 06 2017
Transaction ID : SA11AI.50344
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Foxworth, Douglas, , ,

Mailing Address 1204 Fall Creek Loop

City CEDAR PARK State TX Zip Code 78613

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

Name of Employer Ryan Wholesale, Inc Occupation President / Owner

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2017

Transaction ID : SA11AI.50084

Amount of Each Receipt this Period
 _____ 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Germanaro, Setsuko, , ,

Mailing Address 10133 midland oil rd

City GLENFORD State OH Zip Code 43739

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2017

Transaction ID : SA11AI.49488

Amount of Each Receipt this Period
 _____ 200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Germanaro, Setsuko, , ,

Mailing Address 10133 midland oil rd

City GLENFORD State OH Zip Code 43739

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2017

Transaction ID : SA11AI.50189

Amount of Each Receipt this Period
 _____ 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 450.00

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

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

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

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Graves, Stephen, , ,

Mailing Address 6825 Hobbtown Road

City Rudy	State AR	Zip Code 72952
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 24 / 2017

Transaction ID : SA11AI.49082

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Griffin, Mark, , ,

Mailing Address 4615 175th Ave NW

City ANDOVER	State MN	Zip Code 55304
-----------------	-------------	-------------------

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

Name of Employer The John Birch Society	Occupation Coordinator
--	---------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2017

Transaction ID : SA11AI.50476

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Griffin, Mark, , ,

Mailing Address 4615 175th Ave NW

City ANDOVER	State MN	Zip Code 55304
-----------------	-------------	-------------------

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

Name of Employer The John Birch Society	Occupation Coordinator
--	---------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2017

Transaction ID : SA11AI.49962

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	850.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Harris Robertson, Nancy, , ,

Mailing Address 10320 E Mountain Spring Road, Scot

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2017

Transaction ID : SA11AI.49759

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Heard, Lawrence, , ,

Mailing Address 3904 Halloak ct

City VALRICO State FL Zip Code 33596

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

Name of Employer Self employed Occupation Real estate

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2017

Transaction ID : SA11AI.49561

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 126 E 124th St S

City JENKS State OK Zip Code 74037

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

Name of Employer Hentges Consulting, LLC Occupation Consultant

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2017

Transaction ID : SA11AI.49603

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

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

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Hinman, Roy, , ,

Mailing Address 100 Arricola Ave

City SAINT AUGUSTINE	State FL	Zip Code 32080
-------------------------	-------------	-------------------

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

Name of Employer Island Doctors	Occupation Physician
------------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2017

Transaction ID : SA11AI.50182

Amount of Each Receipt this Period
1700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Holmes, Mark, , ,

Mailing Address 628 Fairview Ave.

City ELMHURST	State IL	Zip Code 60126
------------------	-------------	-------------------

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

Name of Employer self-employed	Occupation self-employed
-----------------------------------	-----------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.49888

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 411 N Pine Hill Road

City GRIFFIN	State GA	Zip Code 30223
-----------------	-------------	-------------------

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

Name of Employer Zia, Inc	Occupation Accountant
------------------------------	--------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2017

Transaction ID : SA11AI.50333

Amount of Each Receipt this Period
50.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 16 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Hornung, Michael, , ,
 Mailing Address 411 N Pine Hill Road
 City State Zip Code
 GRIFFIN GA 30223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Zia, Inc Accountant
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 19 2017
Transaction ID : SA11AI.50101
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Hornung, Michael, , ,
 Mailing Address 411 N Pine Hill Road
 City State Zip Code
 GRIFFIN GA 30223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Zia, Inc Accountant
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 29 2017
Transaction ID : SA11AI.49921
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Hornung, Michael, , ,
 Mailing Address 411 N Pine Hill Road
 City State Zip Code
 GRIFFIN GA 30223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Zia, Inc Accountant
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2017
Transaction ID : SA11AI.49848
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 17 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Kammerer, Joseph, , ,
 Mailing Address 4951 Pernod Avenue
 City SAINT LOUIS State MO Zip Code 63139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2017
Transaction ID : SA11AI.50260
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Kiester, Douglas, , ,
 Mailing Address 19 Rippling Stream
 City IRVINE State CA Zip Code 92603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of California Occupation Professor
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2017
Transaction ID : SA11AI.49721
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Kiester, Douglas, , ,
 Mailing Address 19 Rippling Stream
 City IRVINE State CA Zip Code 92603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of California Occupation Professor
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2017
Transaction ID : SA11AI.49581
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 48
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Kiester, Douglas, , ,

Mailing Address 19 Rippling Stream

City IRVINE State CA Zip Code 92603

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

Name of Employer University of California Occupation Professor

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2017

Transaction ID : SA11AI.50238

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kiester, Douglas, , ,

Mailing Address 19 Rippling Stream

City IRVINE State CA Zip Code 92603

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

Name of Employer University of California Occupation Professor

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2017

Transaction ID : SA11AI.49999

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Kovas, Connie, J, ,

Mailing Address 8007 Waterscape Dr

City Fort Wayne State IN Zip Code 46804

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 23 / 2017

Transaction ID : SA11AI.48979

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Leadon, Bernard M, , ,

Mailing Address 1920 Adelia St, Ste 300

City: NASHVILLE State: TN Zip Code: 37212

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

Name of Employer: retired Occupation: retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2017

Transaction ID : SA11AI.49379

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 103 Hawthorne Vilage Rd.

City: Nashua State: NH Zip Code: 03062-2277

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

Name of Employer: retired Occupation: retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2017

Transaction ID : SA11AI.49434

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 21 W Rosemont Ave

City: ALEXANDRIA State: VA Zip Code: 22301

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

Name of Employer: Self Employed Occupation: Accountant

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2017

Transaction ID : SA11AI.49712

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 750.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Maxwell, Janette, , ,
 Mailing Address 122 hill street
 City Williams Bay State WI Zip Code 53191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Owner
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2017
Transaction ID : SA11AI.49971
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Mazzucco, Michael, , ,
 Mailing Address 19A Ta'Agan Point Road
 City Danbury State CT Zip Code 06811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michael J. Mazzucco, PC Occupation Civil Engineer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2017
Transaction ID : SA11AI.50534
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Mccutchen, Chris, , ,
 Mailing Address 9384 Ridgeview St.
 City TULSA State OK Zip Code 74131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CDCLaure Occupation CEO
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2017
Transaction ID : SA11AI.49366
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 21 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
meyer, steven, , ,
Mailing Address 2621 Ridgepoint Dr

City: AUSTIN State: TX Zip Code: 78754

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

Name of Employer: iKEY, Ltd Occupation: owner

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 09 / 14 / 2017
Transaction ID : SA11AI.50219

Amount of Each Receipt this Period: 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Miller, Mathew, , ,
Mailing Address 3763 7th Rd

City: Bremen State: IN Zip Code: 46506

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

Name of Employer: Newmar Corp Occupation: Manufacturer

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 5400.00

Date of Receipt: 09 / 24 / 2017
Transaction ID : SA11AI.49024

Amount of Each Receipt this Period: 5400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Miller, Mathew, , ,
Mailing Address 3763 7th Rd

City: Bremen State: IN Zip Code: 46506

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

Name of Employer: Newmar Corp Occupation: Manufacturer

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 09 / 24 / 2017
Transaction ID : SA11AI.50573

Amount of Each Receipt this Period: -2700.00

Memo Item
Reattribute to spouse

SUBTOTAL of Receipts This Page (optional)..... ▶ 5400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 48	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

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

Mailing Address 3763 7th Rd

City Bermen	State IN	Zip Code 46506
----------------	-------------	-------------------

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

Name of Employer Newmar Corporation	Occupation Designer
--	------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 24 / 2017

Transaction ID : SA11AI.50574

Amount of Each Receipt this Period
2700.00

Memo Item
Reattribution from Spouse

B. Full Name (Last, First, Middle Initial)
Mora, Assad, , ,

Mailing Address 2780 State Street, suite 11

City SANTA BARBARA	State CA	Zip Code 93105
-----------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Dentist
-----------------------------------	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 28 / 2017

Transaction ID : SA11AI.49957

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 16 E 34th St
#1201

City New York	State NY	Zip Code 10016
------------------	-------------	-------------------

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

Name of Employer Equity Now	Occupation Finance
--------------------------------	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 28 / 2017

Transaction ID : SA11AI.49938

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5500.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 48
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Mullins, Luke, , ,

Mailing Address 4780 Blackberry Lane

City: JUNCTION CITY State: WI Zip Code: 54443

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed Occupation: Manufacturing

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 07 / 2017

Transaction ID : SA11AI.49735

Amount of Each Receipt this Period: 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Nehlen, Brandon, , ,

Mailing Address 2049 S. Ocean Drive Suite 309E

City: HALLANDALE State: FL Zip Code: 33009

FEC ID number of contributing federal political committee: C

Name of Employer: RNehlen and Associates LLC Occupation: Managing Director

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 08 / 19 / 2017

Transaction ID : SA11AI.49487

Amount of Each Receipt this Period: 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Neu, Roger, , ,

Mailing Address 1112 Kiefer Creek Meadows Dr.

City: Ellisville State: MO Zip Code: 63021

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Attorney

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 12 / 2017

Transaction ID : SA11AI.50275

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 48	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Noste, James J, , ,

Mailing Address 2456C 2nd Floor Route 22

City UNION	State NJ	Zip Code 07083
---------------	-------------	-------------------

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

Name of Employer Island Home Center Inc	Occupation CEO
--	-------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2017

Transaction ID : SA11AI.50532

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Noste, James J, , ,

Mailing Address 2456C 2nd Floor Route 22

City UNION	State NJ	Zip Code 07083
---------------	-------------	-------------------

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

Name of Employer Island Home Center Inc	Occupation CEO
--	-------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.50528

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Palmer, Geoff, , ,

Mailing Address 270 N Annon Dr

City Beverly Hills	State CA	Zip Code 90210
-----------------------	-------------	-------------------

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

Name of Employer GH Palmer Associates	Occupation Owner
--	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2017

Transaction ID : SA11AI.48942

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 2900.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 25 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Phillips, Tammy, , ,

Mailing Address 3200 Persimmon Creek

City EDMOND State OK Zip Code 73013

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

Name of Employer Comprehensive Pain Center Occupation CFO

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2017

Transaction ID : SA11AI.50298

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Poplawski, Theresa, , ,

Mailing Address 3000 Via Victoria

City PALOS VERDES estates State CA Zip Code 90274

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

Name of Employer Retired Occupation Retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2017

Transaction ID : SA11AI.50002

Amount of Each Receipt this Period
 2000.00

Memo Item

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

Mailing Address 350 Pearl St

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Perfection Bakeries, Inc. Occupation Executive

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2017

Transaction ID : SA11AI.49015

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 48	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Prout, Alta, , ,

Mailing Address PO BOX 8809

City KODIAK	State AK	Zip Code 99615
----------------	-------------	-------------------

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

Name of Employer Bering Joy Inc.	Occupation Bookkeeper
-------------------------------------	--------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2017

Transaction ID : SA11AI.49824

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Prout, Alta, , ,

Mailing Address PO BOX 8809

City KODIAK	State AK	Zip Code 99615
----------------	-------------	-------------------

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

Name of Employer Bering Joy Inc.	Occupation Bookkeeper
-------------------------------------	--------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2017

Transaction ID : SA11AI.50461

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Rogers, Norman, , ,

Mailing Address 3750 S Las Vegas Bl 3204

City LAS VEGAS	State NV	Zip Code 89158
-------------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2017

Transaction ID : SA11AI.49104

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 48	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Smith, Lecia, , ,

Mailing Address 3245 Laurel Drive

City BLACKSBURG	State VA	Zip Code 24060
--------------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2017

Transaction ID : SA11AI.50277

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Splitter, Larry, , ,

Mailing Address 3602 Syracuse Drive

City Garland	State TX	Zip Code 75043
-----------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2017

Transaction ID : SA11AI.50348

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Splitter, Larry, , ,

Mailing Address 3602 Syracuse Drive

City Garland	State TX	Zip Code 75043
-----------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2017

Transaction ID : SA11AI.49930

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 2200.00
TOTAL This Period (last page this line number only).....▶	_____

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

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

FOR LINE NUMBER: PAGE 28 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Szablowski, Walter, , ,

Mailing Address 102 Inlet Ter

City Belmar State NJ Zip Code 07719

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

Name of Employer Eracent Occupation Engineer

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.49863

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Tealey, Timothy, , ,

Mailing Address 506 W Verona Avenue, #194

City VERONA State WI Zip Code 53593

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2017

Transaction ID : SA11AI.50370

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 506 W Verona Avenue, #194

City VERONA State WI Zip Code 53593

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

Name of Employer retired Occupation retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2017

Transaction ID : SA11AI.50184

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
TMK Enterprises Inc.

Mailing Address 3912 Option Pass

City Fort Wayne State IN Zip Code 46818

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2017

Transaction ID : SA11AI.48989

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Walker, Matthew, , ,

Mailing Address 229 Hemingway Ave

City NEW HAVEN State CT Zip Code 06512

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

Name of Employer Occupation
Self HHG moving business

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2017

Transaction ID : SA11AI.50479

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Walker, Matthew, , ,

Mailing Address 229 Hemingway Ave

City NEW HAVEN State CT Zip Code 06512

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

Name of Employer Occupation
Self HHG moving business

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2017

Transaction ID : SA11AI.50557

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.48989

Corporate contribution refunded in subsequent period.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 31 OF 48
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Weeks, Jacob, , ,

Mailing Address 638 lock rd

City DEERFIELD BEACH State FL Zip Code 33442

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

Name of Employer MCNA Systems Corp Occupation Systems engineer

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2017

Transaction ID : SA11AI.49144

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Wright, Karrie, , ,

Mailing Address 14 E 75th st. Apt 7E

City NEW YORK State NY Zip Code 10021

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

Name of Employer Retired Occupation Retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2017

Transaction ID : SA11AI.50270

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Wright, Michaelon, , ,

Mailing Address 201 W. Big Beaver Rd. #1420

City TROY State MI Zip Code 48084

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

Name of Employer TMW Occupation business partner

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2017

Transaction ID : SA11AI.50318

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial)
Wright, Michaelon, , ,
 Mailing Address 201 W. Big Beaver Rd. #1420
 City TROY State MI Zip Code 48084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TMW Occupation business partner
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2017
Transaction ID : SA11AI.50174
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Zwicker, Donald, , ,
 Mailing Address 2804 W Princeton Avenue
 City Eau Claire State WI Zip Code 54703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ace Ethanol LLC Occupation Merchandiser
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2017
Transaction ID : SA11AI.50068
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Zwicker, Donald, , ,
 Mailing Address 2804 W Princeton Avenue
 City Eau Claire State WI Zip Code 54703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ace Ethanol LLC Occupation Merchandiser
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2017
Transaction ID : SA11AI.49914
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶ 47225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Anedot			Date of Disbursement MM / DD / YYYY 07 / 31 / 2017		
Mailing Address 10156 Perkins Rowe Suite 217F			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70810	Amount of Each Disbursement this Period 358.92		
Purpose of Disbursement Payment Processing Fees		Category/ Type	Transaction ID : SB17.48848		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Anedot			Date of Disbursement MM / DD / YYYY 08 / 31 / 2017		
Mailing Address 10156 Perkins Rowe Suite 217F			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70810	Amount of Each Disbursement this Period 1011.30		
Purpose of Disbursement Payment Processing Fees		Category/ Type	Transaction ID : SB17.48849		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Anedot			Date of Disbursement MM / DD / YYYY 09 / 30 / 2017		
Mailing Address 10156 Perkins Rowe Suite 217F			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70810	Amount of Each Disbursement this Period 1759.56		
Purpose of Disbursement Payment Processing Fees		Category/ Type	Transaction ID : SB17.48907		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3129.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Capital Square Funding Group, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2017	
Mailing Address PO Box 10853			FEC Identification Number C	
City Raleigh	State NC	Zip Code 27605	Amount of Each Disbursement this Period 2337.80	
Purpose of Disbursement Fundraising Consulting		Category/ Type	Transaction ID : SB17.48842	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CARMINE'S STEAKHOUSE			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2017	
Mailing Address 20 South 4th			FEC Identification Number C	
City St Louis	State MO	Zip Code 63102	Amount of Each Disbursement this Period 273.86	
Purpose of Disbursement Food and Beverage		Category/ Type	Transaction ID : SB17.48879	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Facebook, Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 297.22	
Purpose of Disbursement Online Advertising		Category/ Type	Transaction ID : SB17.48859	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2908.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Facebook, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Online Advertising		Amount of Each Disbursement this Period 4.55
Candidate Name		Transaction ID : SB17.48860
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2017
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Online Advertising		Amount of Each Disbursement this Period 11.84
Candidate Name		Transaction ID : SB17.48861
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Facebook, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2017
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Online Advertising		Amount of Each Disbursement this Period 738.25
Candidate Name		Transaction ID : SB17.48862
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	754.64
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Facebook, Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2017	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 10.03	
Purpose of Disbursement Online Advertising		Category/ Type	Transaction ID : SB17.48901	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook, Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2017	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 742.30	
Purpose of Disbursement Online Advertising		Category/ Type	Transaction ID : SB17.48902	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Fritsch, Noel, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017	
Mailing Address 31 Mt. Bolus Road			FEC Identification Number C	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48816	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5252.33
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Fritsch, Noel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017	
Mailing Address 31 Mt. Bolus Road			FEC Identification Number C	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48830	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Fritsch, Noel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2017	
Mailing Address 31 Mt. Bolus Road			FEC Identification Number C	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Disbursement this Period 1272.66	
Purpose of Disbursement Reimbursements (see below)		Category/ Type	Transaction ID : SB17.48834	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Airport Van Rental			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2017	
Mailing Address 10501 Delta Pkwy			FEC Identification Number C	
City Schiller Park	State IL	Zip Code 60176	Amount of Each Disbursement this Period 475.69	
Purpose of Disbursement Car Rental		Category/ Type	Transaction ID : SB17.48834.0	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5772.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2017
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Airfare		Amount of Each Disbursement this Period 728.40
Candidate Name		Transaction ID : SB17.48834.1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Fritsch, Noel, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2017
Mailing Address 31 Mt. Bolus Road		FEC Identification Number C
City Chapel Hill	State NC	Zip Code 27514
Purpose of Disbursement Staff Payroll		Amount of Each Disbursement this Period 4500.00
Candidate Name		Transaction ID : SB17.48846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Graphics Inc		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2017
Mailing Address 7865 Green Bay Road		FEC Identification Number C
City Kenosha	State WI	Zip Code 53142
Purpose of Disbursement Printing Costs		Amount of Each Disbursement this Period 82.29
Candidate Name		Transaction ID : SB17.48839
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4582.29
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 48			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Graphics Inc			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2017		
Mailing Address 7865 Green Bay Road			FEC Identification Number C		
City Kenosha	State WI	Zip Code 53142	Amount of Each Disbursement this Period 296.46		
Purpose of Disbursement Printing Costs		Category/ Type	Transaction ID : SB17.48840		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Graphics Inc			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2017		
Mailing Address 7865 Green Bay Road			FEC Identification Number C		
City Kenosha	State WI	Zip Code 53142	Amount of Each Disbursement this Period 82.29		
Purpose of Disbursement Printing Costs		Category/ Type	Transaction ID : SB17.48847		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2017		
Mailing Address 2520 Countryside Drive			FEC Identification Number C		
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48815		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3378.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 48			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017		
Mailing Address 2520 Countryside Drive			FEC Identification Number C		
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48817		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2017		
Mailing Address 2520 Countryside Drive			FEC Identification Number C		
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 684.78		
Purpose of Disbursement Reimbursements (see below)		Category/ Type	Transaction ID : SB17.48818		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Wisconsin Young Republicans			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2017		
Mailing Address P.O. Box 364			FEC Identification Number C		
City Wales	State WI	Zip Code 53183	Amount of Each Disbursement this Period 372.22		
Purpose of Disbursement Event Tickets		Category/ Type	Transaction ID : SB17.48818.10		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1684.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2017		
Mailing Address 2520 Countryside Drive			FEC Identification Number C		
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48825		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2017		
Mailing Address 2520 Countryside Drive			FEC Identification Number C		
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48829		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017		
Mailing Address 2520 Countryside Drive			FEC Identification Number C		
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48831		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017	
Mailing Address 2520 Countryside Drive			FEC Identification Number C	
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48837	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2017	
Mailing Address 2520 Countryside Drive			FEC Identification Number C	
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48843	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Lira, Gabriela, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2017	
Mailing Address 2520 Countryside Drive			FEC Identification Number C	
City Delavan	State WI	Zip Code 53115	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Staff Payroll		Category/ Type	Transaction ID : SB17.48900	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Mass Markets		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2017
Mailing Address 2937 Sierra Ct. SW		FEC Identification Number C
City Iowa City	State IA	Zip Code 52240
Purpose of Disbursement Phone Services	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 8440.14	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.48828 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Priceline		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2017
Mailing Address 300 Tallapoosa Street		FEC Identification Number C
City Montgomery	State AL	Zip Code 36104
Purpose of Disbursement Lodging	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 274.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.48877 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2017
Mailing Address 60 Columbus Cir		FEC Identification Number C
City New York	State NY	Zip Code 10023
Purpose of Disbursement Television Advertising	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.48911 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	8814.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 48			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. Time Warner Cable		Date of Disbursement MM / DD / YYYY 08 / 07 / 2017
Mailing Address 60 Columbus Cir		FEC Identification Number C
City New York	State NY	Zip Code 10023
Purpose of Disbursement Television Advertising	Candidate Name	Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.48912
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Date of Disbursement MM / DD / YYYY 09 / 15 / 2017
Mailing Address 60 Columbus Cir		FEC Identification Number C
City New York	State NY	Zip Code 10023
Purpose of Disbursement Television Advertising	Candidate Name	Amount of Each Disbursement this Period 4703.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.48913
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Town of Delavan		Date of Disbursement MM / DD / YYYY 08 / 28 / 2017
Mailing Address 5621 Town Hall Road		FEC Identification Number C
City Delavan	State WI	Zip Code 53115
Purpose of Disbursement Event Security	Candidate Name	Amount of Each Disbursement this Period 231.84
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.48833
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5034.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

Full Name (Last, First, Middle Initial) A. WCLO-AM / WJVL-FM			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2017	
Mailing Address P.O.Box 5001			FEC Identification Number C	
City Janesville	State WI	Zip Code 53547	Amount of Each Disbursement this Period 590.59	
Purpose of Disbursement Radio Advertising		Category/ Type	Transaction ID : SB17.48820	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WCLO-AM / WJVL-FM			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2017	
Mailing Address P.O.Box 5001			FEC Identification Number C	
City Janesville	State WI	Zip Code 53547	Amount of Each Disbursement this Period 590.50	
Purpose of Disbursement Radio Advertising		Category/ Type	Transaction ID : SB17.48855	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. WorldNetDaily			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017	
Mailing Address PO Box 1627			FEC Identification Number C	
City Medford	State OR	Zip Code 97501	Amount of Each Disbursement this Period 751.66	
Purpose of Disbursement Donor Gifts		Category/ Type	Transaction ID : SB17.48845	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	▶	1932.75
TOTAL This Period (last page this line number only).....	▶	52246.35

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Volunteers for Nehlen** Transaction ID : **SC/10.19754**

LOAN SOURCE Full Name (Last, First, Middle Initial) NEHLEN, PAUL III, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 796			
City Williams Bay	State WI	ZIP Code 53191	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 37333.85	Balance Outstanding at Close of This Period 62666.15
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TERMS	Date Incurred M 04 / D 16 / Y 2016	Date Due M M / D D / On Demand	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	-----------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional).....▶	62666.15
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Volunteers for Nehlen** Transaction ID : **SC/10.47963**

LOAN SOURCE Full Name (Last, First, Middle Initial) NEHLEN, PAUL III, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 796			
City Williams Bay	State WI	ZIP Code 53191	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 32.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 32.00
----------------------------------	------------------------------------	--

TERMS	Date Incurred M 05 / D 23 / Y 2017	Date Due M M / D D / On Demand	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional).....▶	32.00
TOTALS This Period (last page in this line only).....▶	62698.15

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Volunteers for Nehlen

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable			Nature of Debt (Purpose): Television Advertising- Late Arriving Invoice
Mailing Address 60 Columbus Cir			
City New York	State NY	Zip Code 10023	

Outstanding Balance Beginning This Period 4903.05		Transaction ID : SD10.47940	
Amount Incurred This Period 0.00	Payment This Period 4903.05	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	