

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

☐Check if different  
than previously  
reported. (ACC)

Madison

WI

53703

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00074450

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

02

01

2006

through

02

28

2006

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

Type or Print Name of Treasurer

Reince Priebus

Signature of Treasurer

Electronically Filed by Reince Priebus

Date

05

04

2006

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Wisconsin

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		60598.82
(b) Cash on Hand at Beginning of Reporting Period .....	88072.96	
(c) Total Receipts (from Line 19) .....	150066.35	328064.81
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	238139.31	388663.63
7. Total Disbursements (from Line 31) .....	182839.87	333364.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	55299.44	55299.44
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	75000.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

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

To:

M M  
0 2D D  
2 8Y Y Y Y  
2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	23975.00	62750.00
(i) Itemized (use Schedule A) .....	101154.17	222949.45
(ii) Unitemized .....	125129.17	285699.45
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	23000.00	25000.00
(c) Other Political Committees (such as PACs) .....	148129.17	310699.45
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	0.00	14300.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1937.18	3065.36
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	150066.35	328064.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	150066.35	328064.81

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	4883.10	12058.37
(i) Federal Share.....		
(ii) Non-Federal Share.....	18369.81	45362.42
(b) Other Federal Operating Expenditures.....	96910.70	161941.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	120163.61	219362.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	120.00	120.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	120.00	120.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	62556.26	113882.12
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	62556.26	113882.12
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	182839.87	333364.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	164470.06	288001.77

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	148129.17	310699.45
34. Total Contribution Refunds (from Line 28(d)) .....	120.00	120.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	148009.17	310579.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	101793.80	173999.65
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1937.18	3065.36
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	99856.62	170934.29

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Allen		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address 3605 Taurus Dr.		<b>Transaction ID:</b> SA11A1.23328
City Racine	State WI	Zip Code 53406
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 250.00	Contribution

<b>B.</b> Full Name (Last, First, Middle Initial) Michael Arneson		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address 3040 San Gabriel Dr		<b>Transaction ID:</b> SA11A1.23330
City Brookfield	State WI	Zip Code 53005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Told Development Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RE Developer Aggregate Year-to-Date ▼ 250.00	Contribution

<b>C.</b> Full Name (Last, First, Middle Initial) Cynthia Broydrick		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 191 Fieldstone		<b>Transaction ID:</b> SA11A1.23334
City Delafield	State WI	Zip Code 53018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Broydrick & Associates Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lobbyist Aggregate Year-to-Date ▼ 1000.00	Contribution

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

1500.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Margery Buckeridge

Mailing Address 137 W Main St

City State Zip Code  
 Evansville WI 53536

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11A1.23336

Amount of Each Receipt this Period

200.00

Contribution

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

Lisa Buestrin

Mailing Address 1000 W Calumet Rd

City State Zip Code  
 River Hills WI 53217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.23337

Amount of Each Receipt this Period

1000.00

Contribution

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

James Butera

Mailing Address 1301 Pennsylvania Ave NW #500

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Butera & Andrews

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.23338

Amount of Each Receipt this Period

1000.00

Contribution

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

2200.00

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) James Callan		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 1711 E Dean Rd		<b>Transaction ID:</b> SA11A1.23340
City Milwaukee	State WI	Zip Code 53217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer James L Callan Inc	Occupation Real Estate	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Terence Dittrich		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 9 / 2 0 0 6
Mailing Address 2119 North Summit Avenue 301		<b>Transaction ID:</b> SA11A1.23345
City Milwaukee	State WI	Zip Code 53202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer International Business	Occupation Consultant	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) William Greaves		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 8851 N. Bayside Drive		<b>Transaction ID:</b> SA11A1.23348
City Bayside	State WI	Zip Code 53217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Medical College of Wisconsin	Occupation Physician	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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

11500.00

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



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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
Joyce Heinrich  
Mailing Address 1035 Hill St #224

City State Zip Code  
Watertown WI 53094

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.23351

Amount of Each Receipt this Period

75.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Betty Kalaher  
Mailing Address 780 Willow Lane

City State Zip Code  
Hartford WI 53027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11A1.23358

Amount of Each Receipt this Period

500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
John Koss  
Mailing Address 1492 W. Calumet Ct

City State Zip Code  
Milwaukee WI 53217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Koss Corporation

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.23359

Amount of Each Receipt this Period

1000.00

Contribution

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

1575.00

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

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

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FOR LINE NUMBER: PAGE 10 / 72

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

George Kummeth

Mailing Address 4324 Knuell Street

City State Zip Code  
 Manitowoc WI 54220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Universal Wire & Stamping

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.23360

Amount of Each Receipt this Period

250.00

Contribution

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

Jerris Leonard

Mailing Address 4986 Sentinel Dr. Apt 104

City State Zip Code  
 Bethesda MD 20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Foley & Lardner

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.23361

Amount of Each Receipt this Period

250.00

Contribution

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

Michael Martin

Mailing Address W8485 Trillium Ln

City State Zip Code  
 Antigo WI 54409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allied Insurance Center

Occupation  
Insurance Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11A1.23362

Amount of Each Receipt this Period

500.00

Contribution

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
J Miller  
Mailing Address 4933 Evergreen Drive

City State Zip Code  
Sheboygan WI 53081

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Miller Engineers & Scientists

Occupation  
Civ. Engr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.23363

Amount of Each Receipt this Period

250.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Ernest Niederer  
Mailing Address W207 Miller Road

City State Zip Code  
Honey Creek WI 53138

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.23370

Amount of Each Receipt this Period

250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Oneida Tribe of Indians  
Mailing Address PO Box 365

City State Zip Code  
Oneida WI 54155

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11A1.23372

Amount of Each Receipt this Period

2500.00

Contribution

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

3000.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 72

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Douglas Perisch		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address N68 W13430 Wildrose Ct		<b>Transaction ID:</b> SA11A1.23374
City Menomonee Falls	State WI	Zip Code 53051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Dentist	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Ragatz		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address 3334 Lake Mendota Drive		<b>Transaction ID:</b> SA11A1.23378
City Madison	State WI	Zip Code 53705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Foley & Lardner	Occupation Attorney	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) David Schmidt		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address PO Box E		<b>Transaction ID:</b> SA11A1.23382
City Wittenberg	State WI	Zip Code 54499
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Schmidt-Schulte, Inc	Occupation Funeral Dir	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Spindell			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6	
Mailing Address 1626 North Prospect Avenue			<b>Transaction ID:</b> SA11A1.23384	
City State Zip Code Milwaukee WI 53202			<b>Amount of Each Receipt this Period</b> 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Contribution</b>	
Name of Employer Self Employed		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Janice Tipple			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address 4010 Shadows Court			<b>Transaction ID:</b> SA11A1.23388	
City State Zip Code De Forest WI 53532			<b>Amount of Each Receipt this Period</b> 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Contribution</b>	
Name of Employer GI Office Tech		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Gustav Wirth			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address W62 N562 Washington Ave.			<b>Transaction ID:</b> SA11A1.23391	
City State Zip Code Cedarburg WI 53012			<b>Amount of Each Receipt this Period</b> 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Contribution</b>	
Name of Employer Delta Satellite Corp.		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

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

2000.00

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

23975.00

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

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

FOR LINE NUMBER: PAGE 14 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** ALLIANT ENERGY EMPLOYEE'S POLITICAL ACTION COMM

Mailing Address 4902 NORTH BILTMORE LANE  
PO BOX 77007

City State Zip Code  
MADISON WI 53707

FEC ID number of contributing  
federal political committee.

**C** C00132092

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11C.23392

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** CENTENE CORPORATION POLITICAL ACTION COMMITTEE (CENTENEPAC)

Mailing Address 7711 Carondelet Avenue Suite 800

City State Zip Code  
Clayton MO 63105

FEC ID number of contributing  
federal political committee.

**C** C00397851

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: SA11C.23398

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** CENTENE CORPORATION POLITICAL ACTION COMMITTEE (CENTENEPAC)

Mailing Address 7711 Carondelet Avenue Suite 800

City State Zip Code  
Clayton MO 63105

FEC ID number of contributing  
federal political committee.

**C** C00397851

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: SA11C.23399

Amount of Each Receipt this Period

1000.00

Contribution

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City State Zip Code  
INDIANAPOLIS IN 46285

FEC ID number of contributing  
federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: SA11C.23393

Amount of Each Receipt this Period

5000.00

Contribution

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

GlaxoSmithKline PAC

Mailing Address Five Moore Drive

City State Zip Code  
Durham NC 27709

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

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: SA11C.23395

Amount of Each Receipt this Period

2500.00

Contribution

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

INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 200

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: SA11C.23396

Amount of Each Receipt this Period

1000.00

Contribution

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

8500.00

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

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

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

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MILLER BREWING COMPANY PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6	
Mailing Address 3939 West Highland Boulevard		<b>Transaction ID:</b> SA11C.23400	
City <b>Milwaukee</b>	State <b>WI</b>	Zip Code <b>53201</b>	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b> C00102780		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Milwaukee Police Association</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6	
Mailing Address 1840 North Farwell Avenue		<b>Transaction ID:</b> SA11C.23402	
City <b>Milwaukee</b>	State <b>WI</b>	Zip Code <b>53202</b>	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>NATIONAL ELEVATOR CONSTRUCTORS PAC/ INT'L UNION OF ELEVATOR CONSTRUCTORS (NECA)</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6	
Mailing Address 7154 COLUMBIA GATEWAY DRIVE		<b>Transaction ID:</b> SA11C.23403	
City <b>COLUMBIA</b>	State <b>MD</b>	Zip Code <b>21046</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b> C00383950		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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

5000.00

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



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

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)  
NATIONWIDE POLITICAL PARTICIPATION COMMITTEE

Mailing Address One Nationwide Plaza  
1-27-10

City State Zip Code  
Columbus OH 43215

FEC ID number of contributing  
federal political committee.

C C00076174

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: SA11C.23405

Amount of Each Receipt this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)  
NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 720 E. Wisconsin Ave.

City State Zip Code  
Milwaukee WI 53202

FEC ID number of contributing  
federal political committee.

C C00197095

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: SA11C.23408

Amount of Each Receipt this Period

2000.00

Contribution

C. Full Name (Last, First, Middle Initial)  
SCHERING - PLOUGH CORPORATION BETTER GOVERNMENT FUND

Mailing Address 1 GIRALDA FARM

City State Zip Code  
MADISON NJ 07940

FEC ID number of contributing  
federal political committee.

C C00108290

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11C.23409

Amount of Each Receipt this Period

1000.00

Contribution

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

4000.00

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

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

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

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) US Team PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 4 / 2 0 0 6	
Mailing Address 100 W Putnam Avenue		<b>Transaction ID:</b> SA11C.23410	
City Greenwich	State CT	Zip Code 06830	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) WISCONSIN ELECTRIC POLITICAL ACTION COMMITTEE (WEPAC)		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6	
Mailing Address 231 WEST MICHIGAN STREET		<b>Transaction ID:</b> SA11C.23411	
City MILWAUKEE	State WI	Zip Code 53203	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00099945		Contribution	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

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

2000.00

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

23000.00

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

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

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.**

Full Name (Last, First, Middle Initial)

Capitol Station Post Office

Mailing Address 215 Martin Luther King Jr. Blvd.

City State Zip Code  
 Madison WI 53701

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.27

Date of Receipt

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

Transaction ID: SA15.23414

Amount of Each Receipt this Period

387.27

Postal Reimbursement

**B.**

Full Name (Last, First, Middle Initial)

Capitol Station Post Office

Mailing Address 215 Martin Luther King Jr. Blvd.

City State Zip Code  
 Madison WI 53701

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.75

Date of Receipt

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

Transaction ID: SA15.23415

Amount of Each Receipt this Period

350.48

Postage Reimbursement

**C.**

Full Name (Last, First, Middle Initial)

Xpedite Systems Inc

Mailing Address PO Box 14024

City State Zip Code  
 Newark NJ 07198

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.43

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 6

Transaction ID: SA15.23413

Amount of Each Receipt this Period

1199.43

Reimb for overpymt of bill

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

1937.18

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

1937.18

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Best Western Hotels**

Mailing Address 1005 South Moorland Rd

City Brookfield State WI Zip Code 53005

Purpose of Disbursement

Room Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23581

Date of Disbursement

01 / 05 / 2006

Amount of Each Disbursement this Period

916.76

[MEMO ITEM]

## **B. Andrew Davis**

Mailing Address 827 Michigan Ave

City South Milwaukee State WI Zip Code 53172

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23445

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

684.00

## **C. Robert Delaporte**

Mailing Address 5657 Barbara Dr

City Fitchburg State WI Zip Code 53711

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23450

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

2087.94

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

2771.94

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Econoprint**

Mailing Address 1402 Greenway Cross

City Madison State WI Zip Code 53713

Purpose of Disbursement  
Printing - Not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23453

Date of Disbursement

/   /

Amount of Each Disbursement this Period

380.11

Full Name (Last, First, Middle Initial)

## **B. FLS-DCI**

Mailing Address 2401 W Behrend Drive STE 7

City Phoenix State AZ Zip Code 85027

Purpose of Disbursement  
Telemarketing calls - Not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23454

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27056.50

Full Name (Last, First, Middle Initial)

## **C. Benjamin Gorges**

Mailing Address 716 E Grand Ave #215

City Eau Claire State WI Zip Code 54703

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23463

Date of Disbursement

/   /

Amount of Each Disbursement this Period

798.71

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

28235.32

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Benjamin Gorges

Mailing Address 716 E Grand Ave #215

City Eau Claire State WI Zip Code 54703

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23464

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1173.74

Full Name (Last, First, Middle Initial)

**B.** IRS

Mailing Address Payment Center

City Kansas City State MO Zip Code 64999

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23431

Date of Disbursement

/   /

Amount of Each Disbursement this Period

842.10

Full Name (Last, First, Middle Initial)

**C.** IRS

Mailing Address Payment Center

City Kansas City State MO Zip Code 64999

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23433

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1737.26

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

3753.10

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Jet Network LLC

Mailing Address 420 Lincoln Road Suite 365

City State Zip Code  
Miami Beach FL 33139

Purpose of Disbursement  
air travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.23526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10016.85

Full Name (Last, First, Middle Initial)

**B.** LexisNexis

Mailing Address PO BOX 2314

City State Zip Code  
Carol Stream IL 60132-2314

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.23482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**C.** M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City State Zip Code  
Milwaukee WI 53201

Purpose of Disbursement  
Credit Card Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.23485

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1814.49

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

12231.34

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23423

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

6.30

Full Name (Last, First, Middle Initial)

**B.** M&I Merchant Services

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23504

Date of Disbursement

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

Amount of Each Disbursement this Period

612.07

Full Name (Last, First, Middle Initial)

**C.** M&I Merchant Services

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

credit card fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23577

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

55.06

[MEMO ITEM]

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

**618.37**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Maelstrom Solutions Corporation

Mailing Address 250 N. Sunny Slope STE 300

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
Website hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.23486

Date of Disbursement

/   /

Amount of Each Disbursement this Period

289.84

Full Name (Last, First, Middle Initial)

**B.** Sherrie Osegard

Mailing Address 2346 Talc Trail #208

City Madison State WI Zip Code 53719

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.23494

Date of Disbursement

/   /

Amount of Each Disbursement this Period

927.61

Full Name (Last, First, Middle Initial)

**C.** Sherrie Osegard

Mailing Address 2346 Talc Trail #208

City Madison State WI Zip Code 53719

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.23495

Date of Disbursement

/   /

Amount of Each Disbursement this Period

927.61

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

2145.06

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A. PostMaster</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Postage for business reply mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.23500</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00
<b>B. PostMaster</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Postage - not FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.23501</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 1879.00
<b>C. PostMaster</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Postage for brm - not fea Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.23503</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00

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

**3879.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Splendid Fare**

Mailing Address 1310 Braddock Place

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23509

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

611.34

## **B. The Hilton**

Mailing Address 1001 16th Street NW

City washington State DC Zip Code 20036

Purpose of Disbursement  
Room Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23579

Date of Disbursement

12 / 16 / 2005

Amount of Each Disbursement this Period

455.72

[MEMO ITEM]

## **C. The Lukens Company**

Mailing Address 2800 Shirlington Road 9th floor

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
Finance Mailing - not fea

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23511

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

4474.21

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

5085.55

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. The Lukens Company**

Mailing Address 2800 Shirlington Road 9th floor

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
Finance mailing- not fea

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23512

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13900.87

## **B. The Lukens Company**

Mailing Address 2800 Shirlington Road 9th floor

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
Finance mailing- not fea

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23513

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10362.87

## **C. Sarah Ulrich**

Mailing Address 151 W Gilman Apt B

City Madison State WI Zip Code 53704

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23514

Date of Disbursement

/   /

Amount of Each Disbursement this Period

798.71

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

25062.45

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Sarah Ulrich

Mailing Address 151 W Gilman Apt B

City Madison State WI Zip Code 53704

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23515

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2006

Amount of Each Disbursement this Period

1627.95

Full Name (Last, First, Middle Initial)

**B.** Unisource Direct

Mailing Address 925 Harrington Drive

City Madison State WI Zip Code 53718

Purpose of Disbursement  
Finance mailing - not fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23516

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2006

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C.** Verisign Payment Service

Mailing Address 75 Remittance Driv  
STE 1689

City Chicago State IL Zip Code 60675

Purpose of Disbursement  
Online credit card service fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.23578

Date of Disbursement

MM / DD / YYYY  
12 / 13 / 2006

Amount of Each Disbursement this Period

19.95

[MEMO ITEM]

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

11627.95

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 72

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Windway Capital Corp**

Mailing Address 630 Riverfront Drive #200

City Sheboygan State WI Zip Code 53082

Purpose of Disbursement  
Data Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23521

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

500.00

## **B. Wisc. Dept of Revenue**

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23522

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

172.90

## **C. Wisc. Dept of Revenue**

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23524

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

372.86

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

1045.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Wollitz Online Enterprise

Mailing Address 1434 Crossbill Trail

City  
Goose Creek

State  
SC

Zip Code  
29445

Purpose of Disbursement  
Crystal elephants

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.23582

Date of Disbursement

/   /

Amount of Each Disbursement this Period

367.00

[MEMO ITEM]

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

0.00

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

96455.84

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee Simple IRA plan

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.23422

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

82.82

Full Name (Last, First, Middle Initial)

**B.** American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee Simple IRA plan

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.23436

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

1137.12

Full Name (Last, First, Middle Initial)

**C.** American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee Simple IRA plan

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.23428

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

82.82

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

1302.76

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



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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. American Funds Service Company**

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee Simple IRA plan

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.23437

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

1027.25

Full Name (Last, First, Middle Initial)

## **B. Kimberly Barton**

Mailing Address N24W30863 Fairway Ct

City Pewaukee State WI Zip Code 53072

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.23441

Date of Disbursement

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

Amount of Each Disbursement this Period

157.57

Full Name (Last, First, Middle Initial)

## **C. Kimberly Barton**

Mailing Address N24W30863 Fairway Ct

City Pewaukee State WI Zip Code 53072

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.23442

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

126.42

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

1311.24

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Dudley Bowlby		<b>Transaction ID:</b> SB30B.23443 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 250 Femrite Drive		<b>Amount of Each Disbursement this Period</b> <div>413.31</div>	
City Madison	State WI	Zip Code 53716	<div>Category/ Type</div>
Purpose of Disbursement Payroll			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Dudley Bowlby		<b>Transaction ID:</b> SB30B.23444 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 250 Femrite Drive		<b>Amount of Each Disbursement this Period</b> <div>467.04</div>	
City Madison	State WI	Zip Code 53716	<div>Category/ Type</div>
Purpose of Disbursement Payroll			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Dean Care		<b>Transaction ID:</b> SB30B.23416 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 6</div> </div>	
Mailing Address PO Box 88610		<b>Amount of Each Disbursement this Period</b> <div>458.98</div>	
City Milwaukee	State WI	Zip Code 53288	<div>Category/ Type</div>
Purpose of Disbursement Health Insurance			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**1339.33**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Dean Care

Mailing Address PO Box 88610

City Milwaukee State WI Zip Code 53288

Purpose of Disbursement  
Health Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.23447

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3580.02

Full Name (Last, First, Middle Initial)

**B.** Dean Care

Mailing Address PO Box 88610

City Milwaukee State WI Zip Code 53288

Purpose of Disbursement  
Health Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.23429

Date of Disbursement

/   /

Amount of Each Disbursement this Period

458.98

Full Name (Last, First, Middle Initial)

**C.** Dean Care

Mailing Address PO Box 88610

City Milwaukee State WI Zip Code 53288

Purpose of Disbursement  
Health Care

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.23448

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3671.80

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

7710.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Robert Delaporte

Mailing Address 5657 Barbara Dr

City Fitchburg State WI Zip Code 53711

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.23449

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2087.95

Full Name (Last, First, Middle Initial)

**B.** Richard Dickie

Mailing Address 126 North Blair Street #1

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.23451

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1244.28

Full Name (Last, First, Middle Initial)

**C.** Richard Dickie

Mailing Address 126 North Blair Street #1

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.23452

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1101.31

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

4433.54

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Adam Foltz

Mailing Address 11725 N Prospect Ave

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.23455

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

545.85

Full Name (Last, First, Middle Initial)

**B.** Brett Frazier

Mailing Address 380 W. Washington Ave, #409

City Madison State WI Zip Code 53703

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.23457

Date of Disbursement

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

Amount of Each Disbursement this Period

49.14

Full Name (Last, First, Middle Initial)

**C.** Brett Frazier

Mailing Address 380 W. Washington Ave, #409

City Madison State WI Zip Code 53703

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.23458

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

16.62

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

611.61

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Jason Gammeter		<b>Transaction ID:</b> SB30B.23461 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>
Mailing Address 367 East Monroe St		<b>Amount of Each Disbursement this Period</b> <div>775.02</div>
City Wyocena State WI Zip Code 53969	<div> <div>Purpose of Disbursement Payroll</div> <div> <div>Category/Type</div> </div> </div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jason Gammeter		<b>Transaction ID:</b> SB30B.23462 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>
Mailing Address 367 East Monroe St		<b>Amount of Each Disbursement this Period</b> <div>439.16</div>
City Wyocena State WI Zip Code 53969	<div> <div>Purpose of Disbursement Payroll</div> <div> <div>Category/Type</div> </div> </div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Guardian		<b>Transaction ID:</b> SB30B.23417 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 6</div> </div>
Mailing Address PO Box 95101		<b>Amount of Each Disbursement this Period</b> <div>119.11</div>
City Chicago State IL Zip Code 60694	<div> <div>Purpose of Disbursement Dental Insurance</div> <div> <div>Category/Type</div> </div> </div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**1333.29**

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

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A. Guardian</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 95101 City Chicago State IL Zip Code 60694 Purpose of Disbursement Dental Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB30B.23467</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1081.28
<b>B. Guardian</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 95101 City Chicago State IL Zip Code 60694 Purpose of Disbursement Dental Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB30B.23430</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 119.11
<b>C. Guardian</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 95101 City Chicago State IL Zip Code 60694 Purpose of Disbursement Dental Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB30B.23468</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 1013.14

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

**2213.53**

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

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Jeff Harvey		<b>Transaction ID:</b> SB30B.23420 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 2937 Fish Hatchery Rd #112		<b>Amount of Each Disbursement this Period</b> <div>1306.45</div>	
City Madison State WI Zip Code 53713	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jeff Harvey		<b>Transaction ID:</b> SB30B.23426 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 2937 Fish Hatchery Rd #112		<b>Amount of Each Disbursement this Period</b> <div>1381.25</div>	
City Madison State WI Zip Code 53713	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Donna Heimbach		<b>Transaction ID:</b> SB30B.23469 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 3002 Dianne Drive		<b>Amount of Each Disbursement this Period</b> <div>1139.71</div>	
City Middleton State WI Zip Code 53562	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3827.41**

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



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Donna Heimbach		<b>Transaction ID:</b> SB30B.23470 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>2</td><td>8</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	8		2	0	0	6														
Mailing Address 3002 Dianne Drive		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">688.98</td> </tr> </table>		688.98																			
688.98																							
City Middleton State WI Zip Code 53562	Purpose of Disbursement Payroll Candidate Name	<input type="checkbox"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) IRS		<b>Transaction ID:</b> SB30B.23419 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	5		2	0	0	6														
Mailing Address Payment Center		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">765.48</td> </tr> </table>		765.48																			
765.48																							
City Kansas City State MO Zip Code 64999	Purpose of Disbursement Payroll Tax Candidate Name	<input type="checkbox"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) IRS		<b>Transaction ID:</b> SB30B.23432 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	5		2	0	0	6														
Mailing Address Payment Center		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">5856.96</td> </tr> </table>		5856.96																			
5856.96																							
City Kansas City State MO Zip Code 64999	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="checkbox"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>7311.42</td> </tr> </table>		7311.42																			
7311.42																							
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																					

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

Use separate schedule(s)  
for each category of the  
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) IRS		<b>Transaction ID:</b> SB30B.23424 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address      Payment Center		<b>Amount of Each Disbursement this Period</b> <div>765.46</div>	
City	State		Zip Code
Kansas City	MO		64999
Purpose of Disbursement			<div>Category/Type</div>
Payroll Taxes			
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		
<b>B.</b> Full Name (Last, First, Middle Initial) IRS		<b>Transaction ID:</b> SB30B.23434 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address      Payment Center		<b>Amount of Each Disbursement this Period</b> <div>4669.32</div>	
City	State		Zip Code
Kansas City	MO		64999
Purpose of Disbursement			<div>Category/Type</div>
Payroll Taxes			
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		
<b>C.</b> Full Name (Last, First, Middle Initial) Kimberly Jorns		<b>Transaction ID:</b> SB30B.23471 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address      233 N. Broadway #136		<b>Amount of Each Disbursement this Period</b> <div>1258.41</div>	
City	State		Zip Code
De Pere	WI		54115
Purpose of Disbursement			<div>Category/Type</div>
Payroll			
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**6693.19**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Kimberly Jorns</b>		<b>Transaction ID:</b> SB30B.23472 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 233 N. Broadway #136		<b>Amount of Each Disbursement this Period</b> <div>1292.80</div>	
City De Pere State WI Zip Code 54115	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Brian Kind</b>		<b>Transaction ID:</b> SB30B.23473 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 6403 Alison Ln		<b>Amount of Each Disbursement this Period</b> <div>1497.58</div>	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Brian Kind</b>		<b>Transaction ID:</b> SB30B.23474 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 6403 Alison Ln		<b>Amount of Each Disbursement this Period</b> <div>1527.53</div>	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>4317.91</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Jill Latham		<b>Transaction ID:</b> SB30B.23480 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 613 Third St NE		<b>Amount of Each Disbursement this Period</b> <div>1797.45</div>	
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
<b>B.</b> Full Name (Last, First, Middle Initial) Jill Latham		<b>Transaction ID:</b> SB30B.23481 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 613 Third St NE		<b>Amount of Each Disbursement this Period</b> <div>1374.63</div>	
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
<b>C.</b> Full Name (Last, First, Middle Initial) Larry Loomis		<b>Transaction ID:</b> SB30B.23483 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 3157 Muir Field Road #47		<b>Amount of Each Disbursement this Period</b> <div>40.27</div>	
City Madison State WI Zip Code 53719	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

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

**3212.35**

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Larry Loomis		<b>Transaction ID:</b> SB30B.23484 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>
Mailing Address 3157 Muir Field Road #47		<b>Amount of Each Disbursement this Period</b> <div>75.77</div>
City Madison State WI Zip Code 53719	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Ryan Mahoney		<b>Transaction ID:</b> SB30B.23487 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>
Mailing Address 7608 Hamilton Spring Rd		<b>Amount of Each Disbursement this Period</b> <div>313.02</div>
City Bethesda State MD Zip Code 20817	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Ryan Mahoney		<b>Transaction ID:</b> SB30B.23488 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>
Mailing Address 7608 Hamilton Spring Rd		<b>Amount of Each Disbursement this Period</b> <div>170.78</div>
City Bethesda State MD Zip Code 20817	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

**559.57**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Thomas Mooney

Mailing Address 163 Avon St. Apt 4

City La Crosse State WI Zip Code 54603

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.23421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1216.70

Full Name (Last, First, Middle Initial)

**B.** Thomas Mooney

Mailing Address 163 Avon St. Apt 4

City La Crosse State WI Zip Code 54603

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.23427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1319.16

Full Name (Last, First, Middle Initial)

**C.** Ryan Mylrea

Mailing Address 1512 Adams Street

City Madison State WI Zip Code 53711

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.23489

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.60

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

2736.46

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffery Noltner		<b>Transaction ID:</b> SB30B.23490 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 1543 Langley Lane		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>95.35</div> </div>	
City Madison State WI Zip Code 53718	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) Jeffery Noltner		<b>Transaction ID:</b> SB30B.23491 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 1543 Langley Lane		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>115.28</div> </div>	
City Madison State WI Zip Code 53718	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>C.</b> Full Name (Last, First, Middle Initial) Leslie Oehmen		<b>Transaction ID:</b> SB30B.23492 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 5018 Paulson Court #3		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>1619.55</div> </div>	
City McFarland State WI Zip Code 53558	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

**1830.18**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Leslie Oehmen</b>		<b>Transaction ID:</b> SB30B.23493 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address    5018 Paulson Court #3		<b>Amount of Each Disbursement this Period</b> <div>1627.69</div>	
City McFarland	State WI	Zip Code 53558	<div>Category/ Type</div>
Purpose of Disbursement Payroll		<div>Category/ Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Scott Poole</b>		<b>Transaction ID:</b> SB30B.23498 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address    445 West Gilman #202		<b>Amount of Each Disbursement this Period</b> <div>927.38</div>	
City Madison	State WI	Zip Code 53703	<div>Category/ Type</div>
Purpose of Disbursement Payroll		<div>Category/ Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Scott Poole</b>		<b>Transaction ID:</b> SB30B.23499 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address    445 West Gilman #202		<b>Amount of Each Disbursement this Period</b> <div>481.52</div>	
City Madison	State WI	Zip Code 53703	<div>Category/ Type</div>
Purpose of Disbursement Payroll		<div>Category/ Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3036.59**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) James Sanders		<b>Transaction ID:</b> SB30B.23507 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>
Mailing Address 4510 Texas Trail		<b>Amount of Each Disbursement this Period</b> <div>440.48</div>
City Madison State WI Zip Code 53704		
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) James Sanders		<b>Transaction ID:</b> SB30B.23508 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 6</div> </div>
Mailing Address 4510 Texas Trail		<b>Amount of Each Disbursement this Period</b> <div>483.33</div>
City Madison State WI Zip Code 53704		
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Rick Wiley		<b>Transaction ID:</b> SB30B.23517 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>
Mailing Address 529 Aztalan Drive		<b>Amount of Each Disbursement this Period</b> <div>2244.07</div>
City Madison State WI Zip Code 53718		
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

**3167.88**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Rick Wiley		<b>Transaction ID:</b> SB30B.23518 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>2</td><td>8</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	8		2	0	0	6													
Mailing Address 529 Aztalan Drive		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1988.04</td> </tr> </table>	1988.04																			
1988.04																						
City Madison State WI Zip Code 53718	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Joshua Wilson		<b>Transaction ID:</b> SB30B.23519 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	5		2	0	0	6													
Mailing Address 641 West Main Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>679.52</td> </tr> </table>	679.52																			
679.52																						
City Madison State WI Zip Code 53703	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Joshua Wilson		<b>Transaction ID:</b> SB30B.23520 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>2</td><td>8</td><td></td> <td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	8		2	0	0	6													
Mailing Address 641 West Main Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>400.92</td> </tr> </table>	400.92																			
400.92																						
City Madison State WI Zip Code 53703	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....		<table border="1"> <tr> <td>3068.48</td> </tr> </table>	3068.48																			
3068.48																						
<b>TOTAL This Period (last page this line number only)</b> .....		<table border="1"> <tr> <td></td> </tr> </table>																				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 72

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Payroll Tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB30B.23418

Date of Disbursement

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

Amount of Each Disbursement this Period

158.98

Full Name (Last, First, Middle Initial)

**B.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB30B.23523

Date of Disbursement

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

Amount of Each Disbursement this Period

1204.44

Full Name (Last, First, Middle Initial)

**C.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB30B.23425

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

158.98

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

1522.40

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 72

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB30B.23525

Date of Disbursement

/   /

Amount of Each Disbursement this Period

898.58

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

898.58

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

62438.52

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 53 / 72

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Transaction ID: SC/10.6376

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

M&amp;I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison

State WI

ZIP Code 53705

Election:

☐ Primary☐ General☐ Other (specify) ▼

Original Amount of Loan

110000.00

Cumulative Payment To Date

69000.00

Balance Outstanding at Close of This Period

41000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 1D D  
0 9Y Y Y Y  
2 0 0 2

04/30/02

5.75 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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) ▶

41000.00

**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 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 54 / 72

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Transaction ID: SC/10.10726

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

M&amp;I Bank of Southern Wisconsin

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address P.O. Box 5920

City Madison

State WI

ZIP Code

53705

Original Amount of Loan

34000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

34000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 0 3

5.00

% (apr)

☐ Yes☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

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) ▶

34000.00

**TOTALS** This Period (last page in this line only) ▶

75000.00

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 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 55 / 72

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Lukens CompanyNature of Debt (Purpose):  
Finance Mailing

Mailing Address 2800 Shirlington Road 9th floor

City State ZIP Code  
Arlington VA 22206

Outstanding Balance Beginning This Period

18375.08

Transaction ID: SD10.21874

Amount Incurred This Period

0.00

Payment This Period

18375.08

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Lukens CompanyNature of Debt (Purpose):  
Finance Mailing - not FEA

Mailing Address 2800 Shirlington Road 9th floor

City State ZIP Code  
Arlington VA 22206

Outstanding Balance Beginning This Period

10362.87

Transaction ID: SD10.23049

Amount Incurred This Period

0.00

Payment This Period

10362.87

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

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

0.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 56 / 72  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial)**  
 AT&T T-1 Service

Mailing Address

PO Box 9001307

City	State	Zip Code
Louisville	KY	40290-1307

Purpose of Disbursement:  
 Telephone Trunk Costs

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

34345.57

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23535

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.31		140.38		177.69

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

Mailing Address

135 South LaSalle Street Dept 8123

City	State	Zip Code
Chicago	IL	60674

Purpose of Disbursement:  
 Cable charges

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

34413.42

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23539

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.25		53.60		67.85

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

Mailing Address

1135 Regent Street

City	State	Zip Code
Madison	WI	53715

Purpose of Disbursement:  
 Flowers

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

34466.31

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23541

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.11		41.78		52.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.67		235.76		298.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 57 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

P.O. Box 628306

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement:  
 Cleaning service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

34964.31

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23543

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

104.58

393.42

498.00

**B. Full Name (Last, First, Middle Initial)**  
 Coca-Cola Bottling Company

Mailing Address

PO Box 86

City	State	Zip Code
Minneapolis	MN	55486

Purpose of Disbursement:  
 Office soda

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

35104.42

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23545

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

29.42

110.69

140.11

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

Mailing Address

PO Box 683

City	State	Zip Code
Marshall	WI	53559

Purpose of Disbursement:  
 Snow removal service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

37289.42

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23546

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

458.85

1726.15

2185.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

592.85

2230.26

2823.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 58 / 72  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

380 New York Street

City

State

Zip Code

Redlands

CA

92373-8100

Purpose of Disbursement:  
 Software

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

37711.42

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

Transaction ID: H4.23548

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

88.62

333.38

422.00

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

Mailing Address

PO Box 1140

City

State

Zip Code

Memphis

TN

38101

Purpose of Disbursement:  
 Shipping charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

37733.96

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

Transaction ID: H4.23549

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.73

17.81

22.54

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

Mailing Address

PO Box 1129

City

State

Zip Code

Madison

WI

53701

Purpose of Disbursement:  
 Copier lease

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

38546.00

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

Transaction ID: H4.23551

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

170.53

641.51

812.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

263.88

992.70

1256.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 59 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

GFC Leasing

Mailing Address

PO Box 1129

City

State

Zip Code

Madison

WI

53701

Purpose of Disbursement:

Copier lease

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

39095.80

Date 02 / 01 / 2006

Transaction ID: H4.23553

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

115.46

434.34

549.80

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

Gordon Flesch Company

Mailing Address

PO Box 992

City

State

Zip Code

Madison

WI

53701

Purpose of Disbursement:

Toner for copier

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

39544.90

Date 02 / 01 / 2006

Transaction ID: H4.23554

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

94.31

354.79

449.10

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

Neenah Springs

Mailing Address

PO Box 9

City

State

Zip Code

Oxford

WI

53952

Purpose of Disbursement:

Bottled water

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

39592.34

Date 02 / 01 / 2006

Transaction ID: H4.23557

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.96

37.48

47.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

219.73

826.61

1046.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 60 / 72  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

2420 East Springs Dr

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

39842.81

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23560

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.60

197.87

250.47

**B. Full Name (Last, First, Middle Initial)**  
 Pitney Bowes Credit Corp

Mailing Address

PO Box 85460

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement:  
 Postage meter lease

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

41573.94

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23562

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

363.54

1367.59

1731.13

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

Mailing Address

2301 E. Del Amo Blvd.

City	State	Zip Code
Carson	CA	90220

Purpose of Disbursement:  
 printer cartridges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42445.34

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23563

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

182.99

688.41

871.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

599.13

2253.87

2853.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

SBC Long Distance

Mailing Address

P.O. Box 660688

City State Zip Code

Dallas TX 75266

Purpose of Disbursement:  
Phone chargesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42603.28

Date 

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

Transaction ID: H4.23564

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.17

124.77

157.94

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

SBC Capital Services

Mailing Address

2000 West Ameritech Center Drive

City State Zip Code

Hoffman Estates IL 60196

Purpose of Disbursement:  
Phone leaseCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43046.99

Date 

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

Transaction ID: H4.23565

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

93.18

350.53

443.71

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

SBC Long Distance

Mailing Address

P.O. Box 660688

City State Zip Code

Dallas TX 75266

Purpose of Disbursement:  
Long distance chargesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45073.15

Date 

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

Transaction ID: H4.23566

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

425.49

1600.67

2026.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

551.84

2075.97

2627.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663

Purpose of Disbursement:  
Phone billCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45339.22

Date 02 / 16 / 2006

Transaction ID: H4.23528

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.87

210.20

266.07

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

Mailing Address

Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663

Purpose of Disbursement:  
Phone billCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

46115.68

Date 02 / 16 / 2006

Transaction ID: H4.23529

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

163.06

613.40

776.46

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

Mailing Address

PO Box 9001309

City	State	Zip Code
Louisville	KY	40290-1309

Purpose of Disbursement:  
Long Distance phone billCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47598.09

Date 02 / 16 / 2006

Transaction ID: H4.23532

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

311.31

1171.10

1482.41

## **SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

530.24

1994.70

2524.94

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

PO Box 1231

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
 Utility bill

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48619.39

Date 

M	M
0	2

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23556

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

214.47

806.83

1021.30

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

Mailing Address

P.O. Box 660688

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement:  
 Phone charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50231.65

Date 

M	M
0	2

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23567

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

338.57

1273.69

1612.26

**C. Full Name (Last, First, Middle Initial)**  
 Tony's Instant Litho Printing

Mailing Address

2249 Sherman Avenue

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement:  
 Printing - not fea

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

51073.67

Date 

M	M
0	2

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23568

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

176.82

665.20

842.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

729.86

2745.72

3475.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 64 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

PO Box 9001505

City	State	Zip Code
Louisville	KY	40290

Purpose of Disbursement:  
Rubbish removalCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

51178.82

Date 

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

Transaction ID: H4.23569

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.08

83.07

105.15

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

Mailing Address

231 W Michigan Street

City	State	Zip Code
Milwaukee	WI	53203

Purpose of Disbursement:  
Utility billCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

51700.89

Date 

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

Transaction ID: H4.23570

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

109.63

412.44

522.07

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

Mailing Address

6470 East Johns Crossing Suite 100

City	State	Zip Code
Duluth	GA	30097

Purpose of Disbursement:  
Teleconferencing chargesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

51745.17

Date 

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

Transaction ID: H4.23530

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.30

34.98

44.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

141.01

530.49

671.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 65 / 72  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

AT&amp;T

Mailing Address

PO Box 9001309

City

State

Zip Code

Louisville

KY

40290-1309

Purpose of Disbursement:

Long Distance phone charges

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52022.89

Date 02 / 17 / 2006

Transaction ID: H4.23533

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

58.32

219.40

277.72

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

AT&amp;T T-1 Service

Mailing Address

PO Box 9001307

City

State

Zip Code

Louisville

KY

40290-1307

Purpose of Disbursement:

Telephone Trunk Costs

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52200.58

Date 02 / 17 / 2006

Transaction ID: H4.23536

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

37.31

140.38

177.69

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

Badgerland Chemical &amp; Supply

Mailing Address

PO Box 620303

City

State

Zip Code

Middleton

WI

53562

Purpose of Disbursement:

Cleaning supplies

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52274.48

Date 02 / 17 / 2006

Transaction ID: H4.23537

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

15.52

58.38

73.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

111.15

418.16

529.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 66 / 72  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

1135 Regent Street

 City State Zip Code  
Madison WI 53715

 Purpose of Disbursement:  
Flowers
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52325.27

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

Transaction ID: H4.23542

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.67

40.12

50.79

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

Mailing Address

PO Box 1129

 City State Zip Code  
Madison WI 53701

 Purpose of Disbursement:  
Fax lease
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52451.32

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

Transaction ID: H4.23552

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.47

99.58

126.05

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

Mailing Address

PO Box 9

 City State Zip Code  
Oxford WI 53952

 Purpose of Disbursement:  
Bottled water
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52461.87

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

Transaction ID: H4.23558

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.22

8.33

10.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

39.36

148.03

187.39

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 67 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

2420 East Springs Dr

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52689.35

Date 

M	M
0	2

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23561

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.77		179.71		227.48

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

Mailing Address

P.O. Box 8975

City	State	Zip Code
Madison	WI	53708

Purpose of Disbursement:  
 Subscription Renewal

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52924.00

Date 

M	M
0	2

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23572

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.28		185.37		234.65

**C. Full Name (Last, First, Middle Initial)**  
 Wisc. Dept of Revenue - SIs Tax

Mailing Address

PO Box 93389

City	State	Zip Code
Milwaukee	WI	53293

Purpose of Disbursement:  
 Sales/Use Tax.

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55330.85

Date 

M	M
0	2

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.23571

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
505.44		1901.41		2406.85

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
602.49		2266.49		2868.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

6470 East Johns Crossing Suite 100

City State Zip Code

Duluth GA 30097

Purpose of Disbursement:  
 Teleconferencing charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55405.11

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	6

Transaction ID: H4.23531

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.59

58.67

74.26

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

Mailing Address

PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
 Phone charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55591.64

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	6

Transaction ID: H4.23534

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.17

147.36

186.53

**C. Full Name (Last, First, Middle Initial)**  
 Badgerland Chemical & Supply

Mailing Address

PO Box 620303

City State Zip Code  
Middleton WI 53562

Purpose of Disbursement:  
 Cleaning Supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55645.54

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	6

Transaction ID: H4.23538

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.32

42.58

53.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

66.08

248.61

314.69

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 69 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

Mailing Address

135 South LaSalle Street Dept 8123

City	State	Zip Code
Chicago	IL	60674

Purpose of Disbursement:  
 Cable Charges

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55710.14

Date 02 / 28 / 2006

Transaction ID: H4.23540

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.57

51.03

64.60

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

Mailing Address

P.O. Box 628306

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement:  
 Cleaning service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56706.14

Date 02 / 28 / 2006

Transaction ID: H4.23544

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

209.16

786.84

996.00

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

Mailing Address

PO Box 683

City	State	Zip Code
Marshall	WI	53559

Purpose of Disbursement:  
 Snow Removal Service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57056.14

Date 02 / 28 / 2006

Transaction ID: H4.23547

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

73.50

276.50

350.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

296.23

1114.37

1410.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 70 / 72  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

FedEx

Mailing Address

PO Box 1140

City State Zip Code

Memphis TN 38101

Purpose of Disbursement:  
Shipping chargesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57153.85

Date 02 / 28 / 2006

Transaction ID: H4.23550

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

20.52

77.19

97.71

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

LexisNexis

Mailing Address

PO BOX 2314

City State Zip Code

Carol Stream IL 60132-2314

Purpose of Disbursement:  
SubscriptionCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57353.85

Date 02 / 28 / 2006

Transaction ID: H4.23555

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.00

158.00

200.00

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

Neenah Springs

Mailing Address

PO Box 9

City State Zip Code

Oxford WI 53952

Purpose of Disbursement:  
bottled waterCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57390.79

Date 02 / 28 / 2006

Transaction ID: H4.23559

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.76

29.18

36.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.28

264.37

334.65

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

Republican Party of Wisconsin

Transaction ID: H4.23573

TOTAL AMOUNT

30.00

TOTAL AMOUNT

30.00

TOTAL AMOUNT

23252.91

Image# 26940128409

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.  
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit

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