

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Wisconsin Medical Society Political Action Committee

ADDRESS (number and street) 330 E. Lakeside Street

Check if different than previously reported. (ACC) Madison WI 53715

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00548438

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

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

Type or Print Name of Treasurer Mr. Chris Rasch

Signature of Treasurer Mr. Chris Rasch [Electronically Filed] Date 01 / 22 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="14450.00"/>	<input type="text" value="28420.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="14450.00"/>	<input type="text" value="28420.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14450.00"/>	<input type="text" value="28420.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14450.00	28420.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14450.00	28420.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	14450.00	28420.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
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 Transfers (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))..... ▶	14450.00	28420.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14450.00	28420.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14450.00	28420.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14450.00	28420.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14450.00	28420.00

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)	14450.00	28420.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14450.00	28420.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Wisconsin Medical Society Political Action Committee

A. Mr. William (Rick) Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 University Ave
 City Madison State WI Zip Code 53705-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2015
Transaction ID : 7262477
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

B. Doctor Allan Bertram Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4585 Fox Bluff Lane
 City Middleton State WI Zip Code 53562-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2015
Transaction ID : 7262479
 Amount of Each Receipt this Period
 100.00
 Earmarked for Russ for Wisconsin Inc

C. Sandra Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4585 Fox Bluff Lane
 City Middleton State WI Zip Code 53562-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation homemaker
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2015
Transaction ID : 7262488
 Amount of Each Receipt this Period
 100.00
 Earmarked for Russ for Wisconsin Inc

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Allan Bertram Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4585 Fox Bluff Lane
 City Middleton State WI Zip Code 53562-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 07 / 30 / 2015
Transaction ID : 7262501
 Amount of Each Receipt this Period
 100.00
 Earmarked for Bernie 2016

B. Sandra Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4585 Fox Bluff Lane
 City Middleton State WI Zip Code 53562-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation homemaker
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 07 / 30 / 2015
Transaction ID : 7262503
 Amount of Each Receipt this Period
 100.00
 Earmarked for Bernie 2016

C. Doctor Sridhar V. Vasudevan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5200 Upper Lakeview Ridge Rd
 City Belgium State WI Zip Code 53004-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 07 / 30 / 2015
Transaction ID : 7262506
 Amount of Each Receipt this Period
 2700.00
 Earmarked for Scott Walker Inc

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Mr. William (Rick) Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 University Ave
 City Madison State WI Zip Code 53705-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2015
Transaction ID : 7274603
 Amount of Each Receipt this Period
 350.00
 Earmarked for Boehner for Speaker

B. Ms. Heidi Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 5210 Flad Ave
 City Madison State WI Zip Code 53711-3623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation Political Action & Legislative Member
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2015
Transaction ID : 7274605
 Amount of Each Receipt this Period
 150.00
 Earmarked for Boehner for Speaker

C. Doctor Donn David Dexter
 Full Name (Last, First, Middle Initial)
 Mailing Address 7410 Lakeview Dr
 City Eau Claire State WI Zip Code 54701-8329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mayo Clinic Health System - Luther Cam Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2015
Transaction ID : 7296994
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

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

Mailing Address 7410 Lakeview Dr

City Eau Claire State WI Zip Code 54701-8329

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

Name of Employer self Occupation homemaker

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 08 / 18 / 2015
Transaction ID : 7296996

Amount of Each Receipt this Period
 250.00

Earmarked for Tammy Baldwin for Senate

Full Name (Last, First, Middle Initial)
B. Doctor Jeffrey Wayne Baillet

Mailing Address N3293 Via Cassio

City Lake Geneva State WI Zip Code 53147-5113

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

Name of Employer AMG Aurora Medical Group Corporate Off Occupation Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 08 / 31 / 2015
Transaction ID : 7330016

Amount of Each Receipt this Period
 250.00

Earmarked for Ryan for Congress

Full Name (Last, First, Middle Initial)
C. Doctor Louis-Marcel A. Cesar

Mailing Address PO Box 180253

City Delafield State WI Zip Code 53018-0253

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

Name of Employer Emergency Medicine Specialists SC Occupation Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 08 / 31 / 2015
Transaction ID : 7330018

Amount of Each Receipt this Period
 250.00

Earmarked for Ryan for Congress

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Clarence Paul Chou
Full Name (Last, First, Middle Initial)
Mailing Address 10028 N Miller Dr 2W

City Mequon	State WI	Zip Code 53092-6186
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FEC ID number of contributing federal political committee. **C**

Name of Employer Clarence P Chou MD	Occupation Physician
--	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
08 / 31 / 2015
Transaction ID : 7330020

Amount of Each Receipt this Period
250.00

Earmarked for Ryan for Congress

B. Doctor Thomas Derrig
Full Name (Last, First, Middle Initial)
Mailing Address 36078 Ravinia Park Blvd

City Summit	State WI	Zip Code 53066-9204
----------------	-------------	------------------------

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

Name of Employer AMG Aurora Wilkinson Medical Clinic -	Occupation Physician
---	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
08 / 31 / 2015
Transaction ID : 7330022

Amount of Each Receipt this Period
500.00

Earmarked for Ryan for Congress

C. Doctor Donn David Dexter
Full Name (Last, First, Middle Initial)
Mailing Address 7410 Lakeview Dr

City Eau Claire	State WI	Zip Code 54701-8329
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mayo Clinic Health System - Luther Cam	Occupation Physician
--	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
08 / 31 / 2015
Transaction ID : 7330043

Amount of Each Receipt this Period
500.00

Earmarked for Ryan for Congress

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

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

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

FOR LINE NUMBER: PAGE 11 OF 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)
A. Doctor David Martin Hoffmann
 Mailing Address W7876 Highway O
 City State Zip Code
 Mauston WI 53948-9328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mile Bluff Medical Center Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330045
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

Full Name (Last, First, Middle Initial)
B. Doctor Amy Erna Liepert
 Mailing Address 922 Pebble Beach Dr
 City State Zip Code
 Madison WI 53717-1173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UW Health Surgery Clinic Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330047
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

Full Name (Last, First, Middle Initial)
C. Doctor Timothy G. McAvoy
 Mailing Address 960 San Jose Dr
 City State Zip Code
 Elm Grove WI 53122-2136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Timothy G McAvoy MD SC Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330049
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Duane Jaden Myklejord
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 Magnolia Dr
 City Marshfield State WI Zip Code 54449-3380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marshfield Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330051
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

B. Doctor Sridhar V. Vasudevan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5200 Upper Lakeview Ridge Rd
 City Belgium State WI Zip Code 53004-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330053
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

C. Doctor Paul A. Wertsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 4221 Venetian Ln
 City Madison State WI Zip Code 53718-6655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wildwood Family Clinic SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330056
 Amount of Each Receipt this Period
 500.00
 Earmarked for Ryan for Congress

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Mr. William (Rick) Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 University Ave
 City Madison State WI Zip Code 53705-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330059
 Amount of Each Receipt this Period
 1000.00
 Earmarked for Ryan for Congress

B. Doctor Andrew C. Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 10604 N Port Washington Rd
 City Mequon State WI Zip Code 53092-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Campbell Facial Plastic Surgery - Mequon Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330061
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ryan for Congress

C. Dr. Bruce Michael Neal
 Full Name (Last, First, Middle Initial)
 Mailing Address 1515 Bradbury Ct
 City Green Bay State WI Zip Code 54313-9352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer No Clinic Information Listed Brown Co Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330063
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ryan for Congress

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Charles James Rainey
 Full Name (Last, First, Middle Initial)
 Mailing Address 9590 N Range Line Rd
 City River Hills State WI Zip Code 53217-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer No Clinic Information Listed Milwaukee
 Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330065
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ryan for Congress

B. Doctor Stephen Burtis Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address N2062 Wedgewood Dr E
 City La Crosse State WI Zip Code 54601-7175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330067
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ryan for Congress

C. Ms. Heidi Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 5210 Flad Ave
 City Madison State WI Zip Code 53711-3623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society
 Occupation Political Action & Legislative Member
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : 7330069
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Wisconsin Medical Society Political Action Committee

A. Doctor Sandra L. Osborn
 Full Name (Last, First, Middle Initial)
 Mailing Address 2085 County Road J
 City Verona State WI Zip Code 53593-8829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW School of Medicine and Public Health Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2015
Transaction ID : 7344931
 Amount of Each Receipt this Period
 50.00
 Earmarked for Carson America

B. Doctor Angela Christine Janis
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Wisconsin Ave Apt 1005
 City Madison State WI Zip Code 53703-4171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Health Services Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2015
Transaction ID : 7344933
 Amount of Each Receipt this Period
 250.00
 Earmarked for Russ for Wisconsin Inc

C. Doctor Jay A. Gold
 Full Name (Last, First, Middle Initial)
 Mailing Address 3100 Lake Mendota Dr. #705
 City Madison State WI Zip Code 53705-1462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MetaStar Inc Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2015
Transaction ID : 7344935
 Amount of Each Receipt this Period
 100.00
 Earmarked for Russ for Wisconsin Inc

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

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

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

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)
Wisconsin Medical Society Political Action Committee

A. Doctor Martha (Molli) Leigh Rolli
 Full Name (Last, First, Middle Initial)
 Mailing Address 4322 Rolla Ln
 City Madison State WI Zip Code 53711-2812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mendota Mental Health Inst Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 09 / 09 / 2015
Transaction ID : 7344937
 Amount of Each Receipt this Period
 100.00
 Earmarked for Russ for Wisconsin Inc

B. Doctor John William Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1521 Belle Plane Cir
 City Green Bay State WI Zip Code 54313-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Visonex Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 09 / 14 / 2015
Transaction ID : 7353558
 Amount of Each Receipt this Period
 100.00
 Earmarked for Duffy for Congress

C. John D Riesch MD
 Full Name (Last, First, Middle Initial)
 Mailing Address W148N12919 Pleasant View Dr
 City Germantown State WI Zip Code 53022-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Riesch Surgical Science LLC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 09 / 14 / 2015
Transaction ID : 7353560
 Amount of Each Receipt this Period
 125.00
 Earmarked for Glenn Grothman for Congress

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Dr. Bruce Michael Neal
 Full Name (Last, First, Middle Initial)
 Mailing Address 1515 Bradbury Ct
 City Green Bay State WI Zip Code 54313-9352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer No Clinic Information Listed Brown Co Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2015
Transaction ID : 7353583
 Amount of Each Receipt this Period
 100.00
 Earmarked for Glenn Grothman for Congress

B. Doctor David Galbis-Reig
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 53rd Ave
 City Kenosha State WI Zip Code 53144-5201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wheaton Franciscan Medical Group - Fam Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2015
Transaction ID : 7353585
 Amount of Each Receipt this Period
 100.00
 Earmarked for Glenn Grothman for Congress

C. Doctor Andrew C. Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 10604 N Port Washington Rd
 City Mequon State WI Zip Code 53092-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Campbell Facial Plastic Surgery - Mequ Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2015
Transaction ID : 7353587
 Amount of Each Receipt this Period
 100.00
 Earmarked for Glenn Grothman for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Paul A. Larson
Full Name (Last, First, Middle Initial)
Mailing Address 110 Stoney Beach Rd
City Oshkosh State WI Zip Code 54902-7243
FEC ID number of contributing federal political committee. **C**
Name of Employer Radiology Associates of the Fox Valley Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
09 / 14 / 2015
Transaction ID : 7353599
Amount of Each Receipt this Period 100.00
Earmarked for Glenn Grothman for Congress

B. Doctor Gerald Paul Clarke
Full Name (Last, First, Middle Initial)
Mailing Address W7056 Firelane #3
City Menasha State WI Zip Code 54952
FEC ID number of contributing federal political committee. **C**
Name of Employer Ophthalmic Surgery of Wisconsin LTD Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
09 / 14 / 2015
Transaction ID : 7353601
Amount of Each Receipt this Period 200.00
Earmarked for Glenn Grothman for Congress

C. Doctor Albert Lee Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 100 Sunnyhill Ave
City Oshkosh State WI Zip Code 54902-7433
FEC ID number of contributing federal political committee. **C**
Name of Employer Oshkosh Clinic Building Inc Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
09 / 14 / 2015
Transaction ID : 7353603
Amount of Each Receipt this Period 50.00
Earmarked for Glenn Grothman for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor John William Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1521 Belle Plane Cir
 City Green Bay State WI Zip Code 54313-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Visonex Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 09 / 14 / 2015
Transaction ID : 7353605
 Amount of Each Receipt this Period
 225.00
 Earmarked for Glenn Grothman for Congress

B. Doctor John William Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1521 Belle Plane Cir
 City Green Bay State WI Zip Code 54313-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Visonex Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 09 / 14 / 2015
Transaction ID : 7353609
 Amount of Each Receipt this Period
 500.00
 Earmarked for Ryan for Congress

C. Doctor Jennifer Lynn Kirsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 Country Club Ln
 City Onalaska State WI Zip Code 54650-8791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gundersen La Crosse Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 09 / 14 / 2015
Transaction ID : 7353612
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ryan for Congress

SUBTOTAL of Receipts This Page (optional).....▶	975.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Michele H. Montgomery
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 McIndoe St
 City Wausau State WI Zip Code 54403-5080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aspirus Family Health Specialists Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2015
Transaction ID : 7476925
 Amount of Each Receipt this Period
 275.00
 Earmarked for Bangstad for Congress

B. Doctor Sridhar V. Vasudevan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5200 Upper Lakeview Ridge Rd
 City Belgium State WI Zip Code 53004-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015
Transaction ID : 7502891
 Amount of Each Receipt this Period
 100.00
 Earmarked for Glenn Grothman for Congress

C. Doctor Sridhar V. Vasudevan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5200 Upper Lakeview Ridge Rd
 City Belgium State WI Zip Code 53004-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015
Transaction ID : 7502893
 Amount of Each Receipt this Period
 250.00
 Earmarked for Marco Rubio for President

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Sandra L. Osborn
 Full Name (Last, First, Middle Initial)
 Mailing Address 2085 County Road J
 City Verona State WI Zip Code 53593-8829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW School of Medicine and Public Health Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015
Transaction ID : 7541697
 Amount of Each Receipt this Period 25.00
 Earmarked for Tammy Baldwin for Senate

B. Doctor Daniel D. Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1119 Van Buren St
 City Madison State WI Zip Code 53711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW Health-West Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015
Transaction ID : 7541699
 Amount of Each Receipt this Period 50.00
 Earmarked for Tammy Baldwin for Senate

C. Doctor Tosha Beth Wetterneck
 Full Name (Last, First, Middle Initial)
 Mailing Address 4209 Manitou Way
 City Madison State WI Zip Code 53711-3703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Wisconsin Hospital and C Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015
Transaction ID : 7541701
 Amount of Each Receipt this Period 50.00
 Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Timothy Lisle Bartholow
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 Dunning St
 City Madison State WI Zip Code 53704-5614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEA Trust Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2015
Transaction ID : 7541704
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

B. Mr. William (Rick) Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 University Ave
 City Madison State WI Zip Code 53705-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 7553139
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

C. Doctor Allan Bertram Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4585 Fox Bluff Lane
 City Middleton State WI Zip Code 53562-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 7553141
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Wisconsin Medical Society Political Action Committee

A. Doctor Martha (Molli) Leigh Rolli
 Full Name (Last, First, Middle Initial)
 Mailing Address 4322 Rolla Ln
 City Madison State WI Zip Code 53711-2812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mendota Mental Health Inst Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 7553143
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

B. Doctor Barbara A. Hummel
 Full Name (Last, First, Middle Initial)
 Mailing Address W150S7227 Westcot Dr
 City Muskego State WI Zip Code 53150-8581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Barbara Hummel MD SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 7553146
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

C. Doctor Angela Christine Janis
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Wisconsin Ave Apt 1005
 City Madison State WI Zip Code 53703-4171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Health Services Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 7553148
 Amount of Each Receipt this Period
 250.00
 Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)
A. Doctor Jay A. Gold

Mailing Address 3100 Lake Mendota Dr. #705

City Madison	State WI	Zip Code 53705-1462
-----------------	-------------	------------------------

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

Name of Employer MetaStar Inc	Occupation Physician
----------------------------------	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2015

Transaction ID : 7583286

Amount of Each Receipt this Period
250.00

Earmarked for Tammy Baldwin for Senate

Full Name (Last, First, Middle Initial)
B. Doctor Kenneth J. Pechman

Mailing Address 2949 Oak Stream Dr

City De Pere	State WI	Zip Code 54115-8124
-----------------	-------------	------------------------

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

Name of Employer Dermatology Associates of Wisconsin -	Occupation Physician
---	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

Transaction ID : 7732077

Amount of Each Receipt this Period
100.00

Earmarked for Duffy for Congress

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	14450.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
Earmarked by Rick Abrams; PAC limits unaffected

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2015

Transaction ID : 7251558

Amount of Each Disbursement this Period

250.00

Earmarked by Rick Abrams; PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Russ for Wisconsin Inc

Mailing Address P.O. Box 620061

City State Zip Code
Middleton WI 53562

Purpose of Disbursement
Earmarked by Allan Levin \$100, Sandra Levin \$100; PAC limits unaffected

011

Candidate Name

Russ Feingold

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2015

Transaction ID : 7262500

Amount of Each Disbursement this Period

200.00

Earmarked by Allan Levin \$100, Sandra Levin \$100; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Bernie 2016

Mailing Address P.O. Box 905

City State Zip Code
Burlington VT 05402

Purpose of Disbursement
Earmarked by Allan Levin 100, Sandra Levin 100; PAC limits unaffected

011

Candidate Name

Bernie Sanders

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2015

Transaction ID : 7262505

Amount of Each Disbursement this Period

200.00

Earmarked by Allan Levin 100, Sandra Levin 100; PAC limits unaffected

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

650.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Boehner for Speaker

Mailing Address 320 First St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Earmarked by Rick Abrams 350, Heidi Green 150; PAC limits unaffected

011

Candidate Name

Rep. John Boehner

Category/Type

Office Sought: House Senate President
State: OH District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2015

Transaction ID : 7274607

Amount of Each Disbursement this Period

500.00

Earmarked by Rick Abrams 350, Heidi Green 150; PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement Earmarked by Don Dexter 250, Kristen Dexter 250; PAC limits unaffected

011

Candidate Name

Tammy Baldwin

Category/Type

Office Sought: House Senate President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2015

Transaction ID : 7296989

Amount of Each Disbursement this Period

500.00

Earmarked by Don Dexter 250, Kristen Dexter 250; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement Earmarked by (see memo entries); PAC limits unaffected

011

Candidate Name

Paul Ryan

Category/Type

Office Sought: House Senate President
State: WI District: 01

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 7330072

Amount of Each Disbursement this Period

5150.00

Earmarked by (see memo entries); PAC limits unaffected

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

6150.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Heidi Green

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 7330073

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Timothy McAvoy

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 7330074

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Clarence Chou

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 7330075

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
(Memo Entry)

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

0.00

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

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

Form/Schedule: SB23

Transaction ID : 7330073

Earmarked by Heidi Green

Form/Schedule: SB23

Transaction ID: 7330074

Earmarked by Timothy McAvoy

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

Form/Schedule: SB23

Transaction ID : 7330075

Earmarked by Clarence Chou

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Tom Derrig

011

Candidate Name
Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 01

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : 7330076

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Donn Dexter

011

Candidate Name
Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 01

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : 7330077

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Sri Vasudevan

011

Candidate Name
Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 01

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : 7330078

Amount of Each Disbursement this Period

2	5	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0	.	0	0
---	---	---	---	---	---

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

Form/Schedule: SB23

Transaction ID : 7330076

Earmarked by Thomas Derrig

Form/Schedule: SB23

Transaction ID: 7330077

Earmarked by Donn Dexter

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

Form/Schedule: SB23

Transaction ID : 7330078

Earmarked by Sri Vasudevan

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
Duane Myklejord

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330079

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ryan for Congress

Mailing Address PO Box 1488

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
David Hoffman

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330080

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
Amy Liepert

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330081

Amount of Each Disbursement this Period

2	5	0	0	0	0
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[MEMO ITEM]
(Memo Entry)

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

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

0	0	0	0	0	0
---	---	---	---	---	---

0	0	0	0	0	0
---	---	---	---	---	---

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

Form/Schedule: SB23

Transaction ID : 7330079

Earmarked by Duane Myklejord

Form/Schedule: SB23

Transaction ID: 7330080

Earmarked by David Hoffman

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

Form/Schedule: SB23

Transaction ID : 7330081

Earmarked by Amy Liepert

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Jeffrey Bailet

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330082

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Paul Wertsch

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330083

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Rick Abrams

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330085

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

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

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

Form/Schedule: SB23

Transaction ID : 7330082

Earmarked by Jeffrey Bailet

Form/Schedule: SB23

Transaction ID: 7330083

Earmarked by Paul Wertsch

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

Form/Schedule: SB23

Transaction ID : 7330085

Earmarked by William Abrams

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Andrew Campbell

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330086

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Bruce Neal

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330087

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Charles Rainey

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

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

Transaction ID : 7330089

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0	.	0	0
---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7330086

Earmarked by Andrew Campbell

Form/Schedule: SB23

Transaction ID: 7330087

Earmarked by Bruce Neal

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

Form/Schedule: SB23

Transaction ID : 7330089

Earmarked by Charles Rainey

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Stephen Webster

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 7330090

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Louis Marcel Cesar

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 7330091

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Russ for Wisconsin Inc

Mailing Address P.O. Box 620061

City Middleton State WI Zip Code 53562

Purpose of Disbursement
Earmarked by Angelia Janis 250, Jay Gold 100, Martha Rolli 100; Pac limits unaffected

011

Candidate Name

Russ Feingold

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2015

Transaction ID : 7344939

Amount of Each Disbursement this Period

450.00

Earmarked by Angelia Janis 250, Jay Gold 100, Martha Rolli 100; Pac limits unaffected

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

450.00

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

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

Form/Schedule: SB23

Transaction ID : 7330090

Earmarked by Stephen Webster

Form/Schedule: SB23

Transaction ID: 7330091

Earmarked by Louis Marcel Cesar

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carson America

Mailing Address P.O. Box 1023

City Merrifield State VA Zip Code 22116

Purpose of Disbursement
Earmarked by Sandra Osborn; Pac limits unaffected

011

Candidate Name
Ben Carson

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2015

Transaction ID : 7344942

Amount of Each Disbursement this Period

50.00

Earmarked by Sandra Osborn; Pac limits unaffected

Full Name (Last, First, Middle Initial)

B. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Earmarked by Hartman; PAC limits unaffected

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353615

Amount of Each Disbursement this Period

100.00

Earmarked by Hartman; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Earmarked by Hartman 500, Kirsch 250; PAC limits unaffected

011

Candidate Name
Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 01

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353616

Amount of Each Disbursement this Period

750.00

Earmarked by Hartman 500, Kirsch 250; PAC limits unaffected

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

900.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Earmarked by various (see memo entries); PAC limits unaffected

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353617

Amount of Each Disbursement this Period

1000.00

Earmarked by various (see memo entries); PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Bruce Neal

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353620

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Davis Galbis-Reig

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353621

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

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

1000.00

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

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

Form/Schedule: SB23

Transaction ID : 7353620

Earmarked by Bruce Neal

Form/Schedule: SB23

Transaction ID: 7353621

Earmarked by Davis Galbis-Reig

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Andrew Campbell

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

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

Transaction ID : 7353622

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Paul Larson

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

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

Transaction ID : 7353623

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Gerald Clarke

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

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

Transaction ID : 7353624

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
(Memo Entry)

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

0.00

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

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

Form/Schedule: SB23

Transaction ID : 7353622

Earmarked by Andrew Campbell

Form/Schedule: SB23

Transaction ID: 7353623

Earmarked by Paul Larson

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

Form/Schedule: SB23

Transaction ID : 7353624

Earmarked by Gerald Clarke

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
Al Fisher

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353625

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement
John Hartman

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7353626

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Bangstad for Congress

Mailing Address P.O. Box 616

City State Zip Code
Minocqua WI 54548

Purpose of Disbursement
Earmarked by Michelle Montgomery; PAC limits unaffected

011

Candidate Name

Kirk Bangstad

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2015

Transaction ID : 7477790

Amount of Each Disbursement this Period

275.00

Earmarked by Michelle Montgomery; PAC limits unaffected

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

275.00

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

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

Form/Schedule: SB23

Transaction ID : 7353625

Earmarked by AI Fisher

Form/Schedule: SB23

Transaction ID: 7353626

Earmarked by John Hartman

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City State Zip Code
Fond du Lac WI 54936

Purpose of Disbursement

011

Candidate Name

Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : 7502905

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Marco Rubio for President

Mailing Address P.O. Box 558701

City State Zip Code
Miami FL 33255-8701

Purpose of Disbursement
Earmarked by Sri Vasudevan; PAC limits unaffected

011

Candidate Name

Marco Rubio

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : 7502906

Amount of Each Disbursement this Period

250.00

Earmarked by Sri Vasudevan; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Scott Walker Inc.

Mailing Address P.O. Box 620590

City State Zip Code
Middleton WI 53562

Purpose of Disbursement
Earmarked by Sri Vasudevan; PAC limits unaffected

011

Candidate Name

Scott Walker

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2015

Transaction ID : 7536041

Amount of Each Disbursement this Period

2700.00

Earmarked by Sri Vasudevan; PAC limits unaffected

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

3050.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by S Osborn \$25, D Bennett \$50, T Wetterneck \$50, T Bartholow \$250; Pac limits unaffected

Candidate Name
Tammy Baldwin

Office Sought: House Senate President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2015

Transaction ID : 7541686

Amount of Each Disbursement this Period

375.00

Earmarked by S Osborn \$25, D Bennett \$50, T Wetterneck \$50, T Bartholow \$250; Pac limits unaffected

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by Abrams \$250, Levin \$250, Rolli \$250, Hummel \$250, Janis \$250; PAC limits unaffected

Candidate Name
Tammy Baldwin

Office Sought: House Senate President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 24 / 2015

Transaction ID : 7553150

Amount of Each Disbursement this Period

1250.00

Earmarked by Abrams \$250, Levin \$250, Rolli \$250, Hummel \$250, Janis \$250; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by Jay Gold; Pac limits unaffected

Candidate Name
Tammy Baldwin

Office Sought: House Senate President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2015

Transaction ID : 7583292

Amount of Each Disbursement this Period

250.00

Earmarked by Jay Gold; Pac limits unaffected

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

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

1875.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Earmarked by Ken Pechman; PAC limits unaffected

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2015

Transaction ID : 7732079

Amount of Each Disbursement this Period

100.00

Earmarked by Ken Pechman; PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City Fond du Lac State WI Zip Code 54936

Purpose of Disbursement
John Riesch

011

Candidate Name
Glenn Grothman for Congress

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : 7733732

Amount of Each Disbursement this Period

125.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

100.00

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

14450.00

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

Form/Schedule: SB23

Transaction ID : 7733732

Earmarked by John Riesch

Form/Schedule:

Transaction ID: