

**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

04

01

2007

through

04

30

2007

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

Bill Johnson

Signature of Treasurer

Electronically Filed by Bill Johnson

Date

05

16

2007

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**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	4	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		4485.41
(b) Cash on Hand at Beginning of Reporting Period	26203.16	
(c) Total Receipts (from Line 19)	82895.32	456267.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	109098.48	460753.01
7. Total Disbursements (from Line 31)	81574.43	433228.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27524.05	27524.05
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	27700.00	

☐ 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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	15870.00	104405.00
(i) Itemized (use Schedule A)	65150.79	336769.37
(ii) Unitemized	81020.79	441174.37
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	8500.00
(c) Other Political Committees (such as PACs)	81020.79	449674.37
(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	1569.00	1569.00
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)	305.53	5024.23
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))	82895.32	456267.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	82895.32	456267.60

DETAILED SUMMARY PAGE

of Disbursements

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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)	952.07	9330.15
(i) Federal Share.....		
(ii) Non-Federal Share.....	3581.64	35099.21
(b) Other Federal Operating Expenditures.....	13398.05	127678.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	17931.76	172108.34
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	7000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2500.00
(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	2500.00
29. Other Disbursements.....	0.00	1000.00
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	63642.67	250620.62
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	63642.67	250620.62
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	81574.43	433228.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	77992.79	398129.75

DETAILED SUMMARY PAGE

of Disbursements

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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)	81020.79	449674.37
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	81020.79	447174.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14350.12	137009.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	305.53	5024.23
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14044.59	131984.90

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

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

FOR LINE NUMBER: PAGE 6 / 50

(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)
Mary Alt
Mailing Address 12134 W Belmar Dr

City State Zip Code
Franklin WI 53132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.28407

Amount of Each Receipt this Period

220.00

Contribution

B. Full Name (Last, First, Middle Initial)
John Best
Mailing Address W220N8124 Town Line Rd

City State Zip Code
Menomonee Falls WI 53051

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

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 4 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.28411

Amount of Each Receipt this Period

250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Kathryn Burke
Mailing Address 7710 N Merrie Lane

City State Zip Code
Fox Point WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Housewife

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.28418

Amount of Each Receipt this Period

1250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1720.00

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 7 / 50

(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) Margaret Cowles Mailing Address 2424 Du Charme Ln City Green Bay State WI Zip Code 54301 FEC ID number of contributing federal political committee. C Name of Employer Information requested Occupation Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Transaction ID: SA11A1.28422 Amount of Each Receipt this Period 125.00 Contribution
B. Full Name (Last, First, Middle Initial) Robert Elsner Mailing Address 2420 N. Terrace Avenue City Milwaukee State WI Zip Code 53211-4511 FEC ID number of contributing federal political committee. C Name of Employer Manpower Inc Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Transaction ID: SA11A1.28425 Amount of Each Receipt this Period 500.00 Contribution
C. Full Name (Last, First, Middle Initial) Gregory Grambow Mailing Address 8137 S 88th St City Franklin State WI Zip Code 53132-9173 FEC ID number of contributing federal political committee. C Name of Employer Du-well Grinding Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Transaction ID: SA11A1.28489 Amount of Each Receipt this Period 250.00 Best efforts compliance [MEMO ITEM]

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 50

(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. William Greaves

Mailing Address 8851 N. Bayside Drive

City State Zip Code
 Bayside WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical College of Wisconsin

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.28429

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Jay Hamann

Mailing Address 558 Pinehurst Avenue

City State Zip Code
 Green Bay WI 54302

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.28430

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. William Hawley

Mailing Address 830 12th Ave

City State Zip Code
 Baldwin WI 54002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.28431

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

700.00

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 9 / 50

(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. John Keen

Mailing Address 4604 N Wilshire Rd

City State Zip Code
 Milwaukee WI 53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.28436

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Charles La Bahn

Mailing Address PO Box 503

City State Zip Code
 Grafton WI 53024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Orion Corporation

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.28440

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. John Livemore

Mailing Address 2901 Evergreen Parkway

City State Zip Code
 Sheboygan WI 53083

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.28445

Amount of Each Receipt this Period

250.00

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**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 10 / 50

(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. Joe McAdams

Mailing Address 200 Pearl Ave

City State Zip Code
Mukwonago WI 53149

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.28447

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Richard Merske

Mailing Address W249N7480 Hillside Rd

City State Zip Code
Sussex WI 53089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11A1.28448

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ruth Michels

Mailing Address 364 Oakdale Drive

City State Zip Code
Brownsville WI 53006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michels Pipeline Construc-
tion

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.28449

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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) Ruth Michels Mailing Address 364 Oakdale Drive City State Zip Code Brownsville WI 53006 FEC ID number of contributing federal political committee. C Name of Employer Michels Pipeline Construc- tion Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.28450 Amount of Each Receipt this Period 500.00 Contribution
B. Full Name (Last, First, Middle Initial) Paul Miller Mailing Address 6722 Sullivan Way City State Zip Code Alexandria VA 22315 FEC ID number of contributing federal political committee. C Name of Employer information requested Occupation information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Transaction ID: SA11A1.28451 Amount of Each Receipt this Period 250.00 Contribution
C. Full Name (Last, First, Middle Initial) Kenneth Opitz Mailing Address 4521 Fox Bluff Lane City State Zip Code Middleton WI 53562 FEC ID number of contributing federal political committee. C Name of Employer Opitz Realty Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 7 Transaction ID: SA11A1.28453 Amount of Each Receipt this Period 125.00 Contribution

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 50

(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. Maurice Reese

Mailing Address 713 Lakewood Boulevard

City State Zip Code
 Madison WI 53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

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 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.28456

Amount of Each Receipt this Period

1250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dick Richards

Mailing Address PO Box 2269

City State Zip Code
 Waukesha WI 53187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Inn Hotel

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.28457

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Bruce Robertson

Mailing Address 450 Erie Rd

City State Zip Code
 Green Bay WI 54311

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.28458

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 50

(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) Marilyn Rolfs Mailing Address 817 Crestview Dr City State Zip Code West Bend WI 53095 FEC ID number of contributing federal political committee. C Name of Employer information requested Occupation information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 04 / 02 / 2007 Transaction ID: SA11A1.28460 Amount of Each Receipt this Period 5000.00 Contribution
B. Full Name (Last, First, Middle Initial) Louis Schueller Mailing Address 706 E Circle Rd City State Zip Code Thiensville WI 53092 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 04 / 02 / 2007 Transaction ID: SA11A1.28462 Amount of Each Receipt this Period 250.00 Contribution
C. Full Name (Last, First, Middle Initial) Frank Scott Mailing Address 4014 Hearthstone Drive City State Zip Code Janesville WI 53547 FEC ID number of contributing federal political committee. C Name of Employer Hufcor Occupation Accounting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 04 / 02 / 2007 Transaction ID: SA11A1.28464 Amount of Each Receipt this Period 500.00 Contribution

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 50

(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. John Sensenbrenner

Mailing Address 909 East Forest Avenue

City State Zip Code
 Neenah WI 54956

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.28465

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. James Shafer

Mailing Address 4540 Lagoon Lane

City State Zip Code
 West Bend WI 53095

FEC ID number of contributing federal political committee.

C

Name of Employer
Self EmployedOccupation
Builder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.28466

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Trygve Solberg

Mailing Address PO Box 50

City State Zip Code
 Minocqua WI 54548

FEC ID number of contributing federal political committee.

C

Name of Employer
TA Solberg Company, IncOccupation
Grocer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.28469

Amount of Each Receipt this Period

1250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 50

(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. Toby Steivang

Mailing Address N2013 N Lake Shore Dr

City State Zip Code
 Fontana WI 53125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Walworth State Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.28471

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

B. Peter Wegmann

Mailing Address 453 White Oak Trail

City State Zip Code
 Hartland WI 53029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stewart Chase Co

Occupation
Wine Importer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.28475

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Frederick Wenzel

Mailing Address 4521 Winnequah Road

City State Zip Code
 Monona WI 53716

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of St. Thomas

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11A1.28476

Amount of Each Receipt this Period

50.00

Contribution

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 50

(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)

Carlton Wieckert

Mailing Address 2525 Gosling Way

City

Menasha

State

WI

Zip Code

54952

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.28478

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

15870.00

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

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

FOR LINE NUMBER: PAGE 17 / 50

(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)
Republican Party of WI - State Comm.

Mailing Address 148 E. Johnson Street

City State Zip Code
 Madison WI 53703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1569.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 4 / 2 0 0 7

Transaction ID: SA12.28487

Amount of Each Receipt this Period

1569.00

Transfer - see misc. subm-
ission

SUBTOTAL of Receipts This Page (optional)

1569.00

TOTAL This Period (last page this line number only)

1569.00

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

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

FOR LINE NUMBER: PAGE 18 / 50

(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)

Sherry Schultz

Mailing Address 1418 Pleasure Drive

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RPW

Occupation

Coordinator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1222.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA15.28463

Amount of Each Receipt this Period

305.53

COBRA reimbursement

SUBTOTAL of Receipts This Page (optional)

305.53

TOTAL This Period (last page this line number only)

305.53

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. American Express Merchant Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Credit card processing fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.28313

Date of Disbursement

04 / 09 / 2007

Amount of Each Disbursement this Period

4.50

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
credit card processing fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.28323

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

1.14

Full Name (Last, First, Middle Initial)

C. Dickstein Shapiro LLP

Mailing Address 1825 Eye Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Contribution refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.28374

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2505.64

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. ESRI, Inc.

Mailing Address 380 New York Street

City Redlands State CA Zip Code 92373-8100

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28355

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2007

Amount of Each Disbursement this Period

422.00

Full Name (Last, First, Middle Initial)

B. Gateway Ventures

Mailing Address P.O. Box 1998

City Madison State WI Zip Code 53701

Purpose of Disbursement
Fundraising consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28366

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Heartland Litho

Mailing Address 2087 Atwood Avenue

City Madison State WI Zip Code 53704

Purpose of Disbursement
Envelope printing - not FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28357

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2007

Amount of Each Disbursement this Period

1220.64

SUBTOTAL of Disbursements This Page (optional)

2642.64

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 21 / 50

<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. M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank service fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28491

Date of Disbursement

04 / 01 / 2007

Amount of Each Disbursement this Period

197.53

Full Name (Last, First, Middle Initial)

B. 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.28308

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28404

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

40.00

SUBTOTAL of Disbursements This Page (optional) ►

272.53

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

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. M&I Merchant Services

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement
credit card processing fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.28318

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

204.29

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
credit card processing fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.28403

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

12.95

Full Name (Last, First, Middle Initial)

C. Max Meier's Hartland Inn

Mailing Address 110 Cottonwood Ave

City Hartland State WI Zip Code 53029

Purpose of Disbursement
Dinner

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.28368

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

467.24

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

Full Name (Last, First, Middle Initial)

A. PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
Business reply mail postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28365

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
Business reply mail postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28367

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Purchase Power

Mailing Address Po Box 856042

City Louisville State KY Zip Code 40285

Purpose of Disbursement
Postage for postage machine

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.28362

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 50

<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. Unisource Direct

Mailing Address 925 Harrington Drive

City
Madison

State
WI

Zip Code
53718

Purpose of Disbursement
Finance mailing - not FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.28364

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4350.00

SUBTOTAL of Disbursements This Page (optional)

4350.00

TOTAL This Period (last page this line number only)

13238.05

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

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28322

Date of Disbursement

/ /

Amount of Each Disbursement this Period

925.35

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

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28376

Date of Disbursement

/ /

Amount of Each Disbursement this Period

973.16

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 9001309

City Louisville State KY Zip Code 40290-1309

Purpose of Disbursement
Basic phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28349

Date of Disbursement

/ /

Amount of Each Disbursement this Period

776.87

SUBTOTAL of Disbursements This Page (optional)

2675.38

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. Dudley Bowlby

Mailing Address 250 Femrite Drive

City Madison State WI Zip Code 53716

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28335

Date of Disbursement

/ /

Amount of Each Disbursement this Period

582.03

Full Name (Last, First, Middle Initial)

B. Dudley Bowlby

Mailing Address 250 Femrite Drive

City Madison State WI Zip Code 53716

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28391

Date of Disbursement

/ /

Amount of Each Disbursement this Period

737.24

Full Name (Last, First, Middle Initial)

C. Norman Dawson

Mailing Address PO Box 698

City Wycena State WI Zip Code 53969

Purpose of Disbursement

Payroll garnishment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28321

Date of Disbursement

/ /

Amount of Each Disbursement this Period

22.80

SUBTOTAL of Disbursements This Page (optional)

1342.07

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Norman Dawson		Transaction ID: SB30B.28375 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address PO Box 698		Amount of Each Disbursement this Period <div>5.58</div>	
City Wyocena	State WI		Zip Code 53969
Purpose of Disbursement Payroll garnishment			<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. Full Name (Last, First, Middle Initial) Dean Care		Transaction ID: SB30B.28320 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 2 / 2 0 0 7</div> </div>	
Mailing Address PO Box 88610		Amount of Each Disbursement this Period <div>274.54</div>	
City Milwaukee	State WI		Zip Code 53288
Purpose of Disbursement Health insurance			<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) ▼		
C. Full Name (Last, First, Middle Initial) Dean Care		Transaction ID: SB30B.28377 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address PO Box 88610		Amount of Each Disbursement this Period <div>4355.16</div>	
City Milwaukee	State WI		Zip Code 53288
Purpose of Disbursement Health insurance			<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)

4635.28

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Delta Dental

Mailing Address PO Box 828

City State Zip Code
Stevens Point WI 54481

Purpose of Disbursement
Dental insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.28311

Date of Disbursement

/ /

Amount of Each Disbursement this Period

354.68

Full Name (Last, First, Middle Initial)

B. Department of Workforce Development

Mailing Address PO Box 78960

City State Zip Code
Milwaukee WI 53278-0960

Purpose of Disbursement
Unemployment taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.28379

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3584.05

Full Name (Last, First, Middle Initial)

C. Richard Dickie

Mailing Address 126 North Blair Street #1

City State Zip Code
Madison WI 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.28336

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1150.05

SUBTOTAL of Disbursements This Page (optional)

5088.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Richard Dickie		Transaction ID: SB30B.28392 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period <div>1135.71</div>
City Madison State WI Zip Code 53703	<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. Full Name (Last, First, Middle Initial) Jason Gammeter		Transaction ID: SB30B.28337 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period <div>91.21</div>
City Wycena State WI Zip Code 53969	<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) ▼		
C. Full Name (Last, First, Middle Initial) Jason Gammeter		Transaction ID: SB30B.28393 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period <div>22.30</div>
City Wycena State WI Zip Code 53969	<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) ►

1249.22

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Donna Heimbach		Transaction ID: SB30B.28338 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>	
Mailing Address 3002 Dianne Drive		Amount of Each Disbursement this Period <div>552.07</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) ▼	
B. Full Name (Last, First, Middle Initial) Donna Heimbach		Transaction ID: SB30B.28394 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>	
Mailing Address 3002 Dianne Drive		Amount of Each Disbursement this Period <div>478.72</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) ▼	
C. Full Name (Last, First, Middle Initial) IRS		Transaction ID: SB30B.28319 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 1 / 2 0 0 7</div> </div>	
Mailing Address Payment Center		Amount of Each Disbursement this Period <div>233.44</div>	
City Kansas City State MO Zip Code 64999	Purpose of Disbursement Payroll taxes	<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)

1264.23

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"/> 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

A. Full Name (Last, First, Middle Initial) IRS		Transaction ID: SB30B.28345 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>	
Mailing Address Payment Center		Amount of Each Disbursement this Period <div>5908.54</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. Full Name (Last, First, Middle Initial) IRS		Transaction ID: SB30B.28378 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address Payment Center		Amount of Each Disbursement this Period <div>937.31</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:		
C. Full Name (Last, First, Middle Initial) IRS		Transaction ID: SB30B.28401 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>	
Mailing Address Payment Center		Amount of Each Disbursement this Period <div>6139.34</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:		

SUBTOTAL of Disbursements This Page (optional) ►

12985.19

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

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. Mark Jefferson

Mailing Address 1678 Cottonville Avenue

City Arkdale State WI Zip Code 54613

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28324

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2146.29

Full Name (Last, First, Middle Initial)

B. Mark Jefferson

Mailing Address 1678 Cottonville Avenue

City Arkdale State WI Zip Code 54613

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28382

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2146.27

Full Name (Last, First, Middle Initial)

C. Juston Johnson

Mailing Address 820 Williamson Street

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.28325

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1689.96

SUBTOTAL of Disbursements This Page (optional)

5982.52

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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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

A. Full Name (Last, First, Middle Initial) Juston Johnson		Transaction ID: SB30B.28383 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 820 Williamson Street		Amount of Each Disbursement this Period <div>1446.97</div>
City Madison State WI Zip Code 53703		
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. Full Name (Last, First, Middle Initial) Kimberly Jorns		Transaction ID: SB30B.28314 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period <div>1630.59</div>
City De Pere State WI Zip Code 54115		
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) ▼		
C. Full Name (Last, First, Middle Initial) Kimberly Jorns		Transaction ID: SB30B.28315 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period <div>1482.93</div>
City De Pere State WI Zip Code 54115		
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)		<div>4560.49</div>
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
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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

A. Full Name (Last, First, Middle Initial) Kimberly Jorns		Transaction ID: SB30B.28316 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period <div>1482.93</div>
City De Pere State WI Zip Code 54115		
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. Full Name (Last, First, Middle Initial) Kimberly Jorns		Transaction ID: SB30B.28317 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period <div>750.23</div>
City De Pere State WI Zip Code 54115		
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) ▼	
C. Full Name (Last, First, Middle Initial) Brian Kind		Transaction ID: SB30B.28330 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period <div>1630.30</div>
City Madison State WI Zip Code 53711		
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)

3863.46

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Brian Kind		Transaction ID: SB30B.28385 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period <div>1667.20</div>
City Madison State WI Zip Code 53711		
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. Full Name (Last, First, Middle Initial) Kirsten Kukowski		Transaction ID: SB30B.28329 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 3029 Maple Valley Drive #201		Amount of Each Disbursement this Period <div>1153.71</div>
City Madison State WI Zip Code 53719		
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) ▼		
C. Full Name (Last, First, Middle Initial) Kirsten Kukowski		Transaction ID: SB30B.28386 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 3029 Maple Valley Drive #201		Amount of Each Disbursement this Period <div>1225.00</div>
City Madison State WI Zip Code 53719		
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)

4045.91

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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

A. Full Name (Last, First, Middle Initial) Larry Loomis		Transaction ID: SB30B.28339 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period <div>489.42</div>
City Madison State WI Zip Code 53719		
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. Full Name (Last, First, Middle Initial) Larry Loomis		Transaction ID: SB30B.28395 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period <div>614.66</div>
City Madison State WI Zip Code 53719		
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) ▼	
C. Full Name (Last, First, Middle Initial) Ryan Mahoney		Transaction ID: SB30B.28331 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period <div>356.39</div>
City Bethesda State MD Zip Code 20817		
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)

1460.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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. Ryan Mahoney

Mailing Address 7608 Hamilton Spring Rd

City Bethesda State MD Zip Code 20817

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28387

Date of Disbursement

/ /

Amount of Each Disbursement this Period

240.75

Full Name (Last, First, Middle Initial)

B. Kathryn Mize

Mailing Address 414 N Livingston Street #2

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.28332

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1726.70

Full Name (Last, First, Middle Initial)

C. Kathryn Mize

Mailing Address 414 N Livingston Street #2

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.28388

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1795.57

SUBTOTAL of Disbursements This Page (optional)

3763.02

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. Jeffery Noltner

Mailing Address 1543 Langley Lane

City Madison State WI Zip Code 53718

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.28340

Date of Disbursement

/ /

Amount of Each Disbursement this Period

92.41

Full Name (Last, First, Middle Initial)

B. Jeffery Noltner

Mailing Address 1543 Langley Lane

City Madison State WI Zip Code 53718

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB30B.28396

Date of Disbursement

/ /

Amount of Each Disbursement this Period

87.35

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

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

State: District:

Transaction ID: SB30B.28333

Date of Disbursement

/ /

Amount of Each Disbursement this Period

973.38

SUBTOTAL of Disbursements This Page (optional)

1153.14

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

A. Full Name (Last, First, Middle Initial) Sherrie Osegard		Transaction ID: SB30B.28389 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period <div>972.86</div>
City Madison State WI Zip Code 53719		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
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. Full Name (Last, First, Middle Initial) Scott Poole		Transaction ID: SB30B.28341 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period <div>381.68</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
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) ▼	
C. Full Name (Last, First, Middle Initial) Scott Poole		Transaction ID: SB30B.28397 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period <div>406.99</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
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)		<div>1761.53</div>
TOTAL 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

A. Full Name (Last, First, Middle Initial) Karoline Rezin		Transaction ID: SB30B.28334 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>	
Mailing Address 1836 Gruman		Amount of Each Disbursement this Period <div>699.53</div>	
City Tomah State WI Zip Code 54660	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. Full Name (Last, First, Middle Initial) Karoline Rezin		Transaction ID: SB30B.28390 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>	
Mailing Address 1836 Gruman		Amount of Each Disbursement this Period <div>565.36</div>	
City Tomah State WI Zip Code 54660	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) ▼	
C. Full Name (Last, First, Middle Initial) James Sanders		Transaction ID: SB30B.28342 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>	
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period <div>434.71</div>	
City Madison State WI Zip Code 53704	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)

1699.60

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. James Sanders

Mailing Address 4510 Texas Trail

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: SB30B.28398

Date of Disbursement

/ /

Amount of Each Disbursement this Period

644.12

Full Name (Last, First, Middle Initial)

B. Charles Triller

Mailing Address 609 East Gorham St #14

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.28343

Date of Disbursement

/ /

Amount of Each Disbursement this Period

591.78

Full Name (Last, First, Middle Initial)

C. Charles Triller

Mailing Address 609 East Gorham St #14

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.28399

Date of Disbursement

/ /

Amount of Each Disbursement this Period

792.32

SUBTOTAL of Disbursements This Page (optional)

2028.22

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

A. Full Name (Last, First, Middle Initial) Joshua Wilson		Transaction ID: SB30B.28344 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period <div>485.40</div>
City Madison State WI Zip Code 53703		
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. Full Name (Last, First, Middle Initial) Joshua Wilson		Transaction ID: SB30B.28400 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period <div>606.49</div>
City Madison State WI Zip Code 53703		
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) ▼	
C. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue		Transaction ID: SB30B.28346 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 0 7</div> </div>
Mailing Address PO Box 93208		Amount of Each Disbursement this Period <div>1171.05</div>
City Milwaukee State WI Zip Code 53293		
Purpose of Disbursement Payroll taxes	<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) ►

2262.94

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 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

Sales/use tax

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB30B.28373

Date of Disbursement

/ /

Amount of Each Disbursement this Period

377.99

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.28402

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1230.25

SUBTOTAL of Disbursements This Page (optional)

1608.24

TOTAL This Period (last page this line number only)

63429.69

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

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

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

M&I Bank of Southern Wisconsin

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

106000.00

Balance Outstanding at Close of This Period

4000.00

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) ▶

4000.00

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 45 / 50

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

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

M&I Bank of Southern Wisconsin

Election:

- ☐
- 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

10300.00

Balance Outstanding at Close of This Period

23700.00

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) ▶

23700.00

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

27700.00

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

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

 PAGE 46 / 50
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

 Mailing Address
PO Box 992

 City State Zip Code
Madison WI 53701

 Purpose of Disbursement:
Copier toner

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

40501.09

 Date M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7

Transaction ID: H4.28309

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.14		478.30		605.44

B. Full Name (Last, First, Middle Initial)
City of Madison Treasurer

 Mailing Address
215 Martin Luther King Blvd

 City State Zip Code
Madison WI 53701

 Purpose of Disbursement:
Graffiti removal at headquarters

 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

40601.09

 Date M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7

Transaction ID: H4.28310

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

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:
Conference calls

 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

40631.24

 Date M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: H4.28347

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.33		23.82		30.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.47		581.12		735.59

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)

AT&T

Mailing Address

PO Box 9001309

City

State

Zip Code

Louisville

KY

40290-1309

Purpose of Disbursement:

Long distance

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

42399.73

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 3

2 0

0 7

Transaction ID: H4.28348

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

371.38

1397.11

1768.49

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 TV

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

42453.51

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 3

2 0

0 7

Transaction ID: H4.28351

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.29

42.49

53.78

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:

Janitorial 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

42610.26

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 3

2 0

0 7

Transaction ID: H4.28353

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

32.92

123.83

156.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

415.59

1563.43

1979.02

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 48 / 50

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. 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:
Staff sodaCategory/
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

42736.07

Date

M	M
0	4

 /

D	D
1	3

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.28354

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.42

99.39

125.81

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

Mailing Address

PO Box 1129

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:
Copier 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

43634.79

Date

M	M
0	4

 /

D	D
1	3

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.28356

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

188.73

709.99

898.72

C. 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 machine suppliesCategory/
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

43929.36

Date

M	M
0	4

 /

D	D
1	3

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.28360

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

61.86

232.71

294.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

277.01

1042.09

1319.10

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 49 / 50
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
 Pro One Janitorial Inc

Mailing Address

1486 Kenwood Center

City

Menasha

State

WI

Zip Code

54952

Purpose of Disbursement:
 Janitorial services

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

44429.36

Activity or Event Identifier:
 Administrative

Date

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: H4.28363

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

105.00

395.00

500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

105.00

395.00

500.00

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

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

952.07

3581.64

4533.71

Image# 27990071432

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
