

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

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

FOR LINE NUMBER: PAGE 37 OF 112

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT, JOHN, D., MR.,**

Mailing Address P.O. BOX 66

City  
LAKE DELTON

State  
WI

Zip Code  
53940-0066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SCOTT CONSTRUCTION

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 10 / 2019

Transaction ID : SA11A.1079507

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEARLES, PAUL, A., DR.,**

Mailing Address 2220 WAUNONA WAY

City  
MADISON

State  
WI

Zip Code  
53713-1620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEAN MEDICAL CENTER

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 16 / 2019

Transaction ID : SA11A.1079782

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SEIDENSTUCKER, PAUL, , ,**

Mailing Address 10790 ROSE AVENUE, 106

City  
LOS ANGELES

State  
CA

Zip Code  
90034-4440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

Transaction ID : SA11A.1080483

Amount of Each Receipt this Period

345.00

☐ Memo Item  
CONTRIBUTION

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

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

645.00